MDOT MARYLAND DEPARTMENT OF TRANSPORTATION
MOTOR VEHICLE ADMINISTRATION
6601 Ritchie Highway, N.E.
Glen Burnie, Maryland 21062

Student Record and Completion Form

Classroom

Full Name	Date of Birth	Age (at class start)	Phone Number	
Street Address	**City**	**County**	**State**	**Zip Code**
	LEXINGTON PA	ST MARY	MD	20653

Name of Driving School	Branch Location	School Number	Maryland State Issued ID: (Authorized School Official)
SAFETY ZONE	Lexington Park	C00674	DE10005032

Date	Start Time	End Time	Hours	Unit	Instructor Initials	Instructor ID Number	Test Score*
			3	Unit 1 / Orientation	VJ	1041474	
			3	Unit 2 / Test	VJ	1041474	
			3	Unit 3 / Test	VJ	1041474	
			3	Unit 4 / Test	VJ	1041474	
			3	Unit 5 / Test	VJ	1041474	
			3	Unit 6 / Test	VJ	1041474	
			3	Unit 7 / Test	VJ	1041474	
			3	Unit 8 / Test	VJ	1041474	
			3	Unit 9 / Test	VJ	1041474	
			3	Unit 10 / Test	VJ	1041474	

***Answer sheets must be attached.** Final Score:

I certify under penalty of perjury that the above information is true and correct to the best of my knowledge, information and belief.

Vanessa Jones

Authorized School Official's Signature Date

Student's Signature Date

Behind the Wheel

Date	Start Time	End Time	Hours	Lesson	Tag Number	Instructor Initials	Instructor ID Number	Grade**
			2	BTW 1/2				S
			2	BTW 3/4				S
			2	BTW 5/6				S

**Grade: S = Satisfactory, U = Unsatisfactory

I certify under penalty of perjury, that the above information is true and correct to the best of my knowledge, information and belief.

Vanessa Jones

Authorized School Official's Signature Date

Student's Signature Date

Electronically Submitted On

Submitted By

Electronic or hard copy must be held in each students records. A printed copy must be made available to the student and administration.