

TRAFFIC SAFETY DIVISION APPLICATION FOR PERMISSION TO ENROLL IN DRIVER EDUCATION CORRESPONDENCE SCHOOL

The Traffic Safety Division believes that personal instruction is of great benefit to students but recognizes that there are some situations that make it extremely difficult for a student to attend a local driver education course due to distance, availability, schedule or extenuating circumstances. TSD may, in its discretion, grant permission for a student to enroll in a correspondence course **only** if the student meets one of the two conditions set forth below (18.20.3.8 NMAC).

Please note that applicants must provide all information requested. Incomplete applications cannot not be processed and will be returned pursuant to the review procedure below.

INSTRUCTIONS FOR COMPLETING THIS APPLICATION

advance between fields and then print it out, or by typing, or by print black ink	nting legibly in
 provide all information requested in the application form including the Correspondence School you wish to use 	e name of the
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 include copies of all the required documents listed for Condition 2 or form 	f the application
parent or guardian must sign and date the application	
make a copy of the completed application and required documents	for your records
mail, email, or fax documents to:	ioi your rooorac

Attn: Driver Service Programs
UNM-Transportation Safety Center
MSC07 4030
1 University of New Mexico
Albuquerque, NM 87131-0001

Phone: 505-277-0961 Fax: 505-277-8975

If you have any questions concerning this application or any of the forms, please contact Elizabeth Andrews by telephone at 505-277-0961 or email at TSCdriverprograms@unm.edu.

Once we have received your application, & provided it meets the criteria for approval, we will email your preferred correspondence school and copy you in that email. **Please allow (2) weeks for processing.** From that point, you will need to contact the school to enroll and obtain a permit referral card after completion of 9 hours of the course is provided.

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Request for Driver Education Correspondence School

Name of Student:			
Student Date of Birth:			
Mailing Address:			
Parent/GuardianTelephone numbe	er:		
Parent/Guardian Email address:			
Parent/Guardian Name:			
Name of Correspondence School	you wish to	use:	
A list of licensed schools is online: https: Note: Correspondence schools are at the	//transportatio	n.unm.edu/tra	nsportation/youth/
☐ Condition 1. The student name in order for a student to be approved unnotified the New Mexico Public Education for the current school year; a copy of the the confirmation you received if you notified by the confirmation you received if you not	der this condit in Department E Establishme fied PED elec	tion you must t (PED) that yo nt of a Home s tronically. If yo	provide verification that you have but intend to home school this student School Notification Form or a copy of the have questions about home
IF THE STUDENT IS NOT HOME ☐ Condition 2. Circumstances macorrespondence school			
Name of School student currently attends:			
Address of School			
City, State, Zip Code			
Telephone Number of School			
Name of Principal or Counselor			
Telephone Number of this Person			
Type of School	Public*	Private 🗆	Charter

*State law requires public schools to offer Driver Education as part of its curriculum (See NMSA 1978 Section 22-13-12).

Answer each question by checking YES or NO.	YES	NO
Does the school the student attends provide driver education? If no, attach a letter from		
the school on official school stationery, signed by the principal/assistant principal		
or a letter on district letterhead signed by the superintendant/assistant		
superintendant so stating.		
Is there a driver education school within 25 miles of the student's residence? If no,		
attach a letter stating the location and distance in driving time to the nearest		
private driver education school (A list of licensed schools is listed by city on the		
following website: http://tsc.unm.edu/approved-providers/17).		

If the school the student attends provides driver education or a private driver education school is within 25 miles of the student's residence, you must indicate the extenuating circumstances that prevent the student from attending driver ed classes locally.

Please answer each question by checking YES or NO.	YES	NO
A. Are there transportation issues that prevent the student from attending local driver ed		
classes? If yes, please provide supporting documentation of the issues that		
prevent transporting the student to and from local driver ed classes such as the		
student's bus schedule or a letter detailing other transportation issues.		
B. Is the student involved in academic activities such as AP or honors classes, school		
groups or functions, or a work/study program that conflict with a local driver ed class? If		
yes, attach a letter on letterhead from the supervising teacher or principal on		
official school stationery detailing how this activity conflicts with local driver ed		
classes		
C. Is the student involved in extracurricular activities such as church groups or activities,		
sponsored sports activities, band, choir, orchestra, volunteer activities, scouting, or FFA		
that conflict with an available driver education program? If yes, attach a letter on		
<u>letterhead</u> signed by the person in charge of the activity on official stationery		
detailing how this activity conflicts with local driver ed classes		
D. Is the student working at a job that has conflicting hours with an available driver		
education program? If yes, attach a letter from the student's employer detailing how		
the student's work hours conflicts with local driver ed classes.		
E. Are there any other extenuating circumstances that prevent this student from attending		
a driver education program? If yes, please attach a letter detailing the circumstances		
and their duration (Note: Cost or personal preference are not considered extenuating		
circumstances).		

By my signature below, I certify, under penalty of perjury, that the information given in this	
application and all substantiating documents is true to the best of my knowledge and ability.	
will assume responsibility in providing behind-the-wheel training for my student.	

Parent or Guardian's signature	Date