

STUDENT AFFIDAVIT OF IDENTITY REQUIREMENT

Texas Council Defensive Driving

Please fax completed form to 1-480-393-5281

We're sorry, but your identity could not be verified using our third party databases. Texas rule 176.1110 (C)(7) requires that the following form be completed and returned to our office before a certificate of completion may be issued on your behalf.

You are allowed to continue and complete the course but will not be issued a uniform certificate of completion until a completed version of this form is received. Please print this form now.

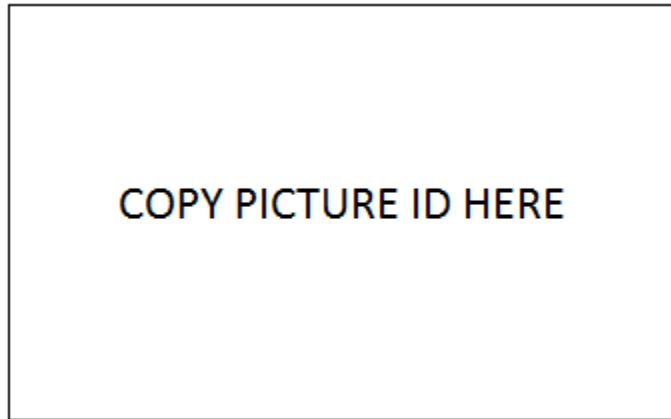
Legal Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Driver's License Number (If Applicable): _____ State Issuing License: _____

Date of Birth (MANDATORY): _____



Make the Following Statement:

I have read and accepted the school's Student Enrollment Contract and Terms of Agreement for Texas Council Defensive Driving.

I personally have participated in the aforementioned six-hour driving safety course in accordance with the policies and procedures of the course with the exception of the final examination. I certify that I have not and will not receive any assistance to complete this course other than assistance from the school's technical support staff or instructors. I have not attempted to misrepresent my identification in any way while taking this driving safety course. My driver's license or equivalent photo identification is shown above.

Signature

STATE OF _____ COUNTY OF _____

Personally appeared before me, the above-named _____, know to me, who provided the document copied above, and who being duly sworn deposes and says that she/he executed this affidavit and that the statements and representations contained therein are true and correct to the best of his/her knowledge and belief.

SUBSCRIBED AND SWORN before me on this _____ day of _____, _____.
Month Year

Notary Public Signature

SEAL

COMMISSION EXPIRES: _____