

DRIVERS EDUCATION PROGRAM 2023-2024

Clayton High School, #1 Mark Twain Circle, Clayton, MO 63105

The Drivers Education Program sponsored by the School District of Clayton includes the following components:

- Parent/Student Orientation Meeting
- 12 hours of class instruction/discussion
- 6 hours of individual driving instruction
- 6 hours of driving observation

Eligibility: Students must be 15 years of age before the first day of class.

*This is a state law and no exceptions can be made

Cost: **\$425 resident/patron student** **\$475 non-resident student**

A parent/student orientation meeting will be held in the CHS Auditorium on the first day of class. After the meeting, students will continue with classroom instructions in Health Classroom A.

COVID REQUIREMENTS: Prior to the start of the first session, all parents will need to complete the Permission & Waiver of Liability form found on the Drivers Ed webpage

Fall: October 21 – November 18

Class: October 21 (Parent/Student meeting)

Time: 8:30am - 11:00am

Class: Oct. 28, Nov. 4, 11 & 18

Time: 8:30am - 11:00am

Winter: January 27 – March 9 (no class Feb 17)

Class: January 27 (Parent/Student meeting)

Time: 8:30am - 11:00am

Class: Feb. 3, 10, 24, March 2 & 9

Time: 8:30am - 10:30am

Spring: April 20 – May 18

Class: April 20 (Parent/Student meeting)

Time: 8:30am - 11:00am

Class: April 27, May 4, 11 & 18

Time: 8:30am - 11:00am

Summer 1 June 3 – 20 (Drive times offered through July 7)

Class: June 3 (Parent/Student meeting)

Time: 5:30pm - 8:00pm

Class: June 6, 10, 13, 17 & 20

Time: 4:00pm - 6:00pm

Summer 2 July 15 – 19 (Drive times offered through August 11)

Class: July 15 (Parent/Student meeting)

Time: 8:00am - 10:30am

Class: July 16, 17, 18 & 19

Time: 8:00am - 10:30am

On-the-road-training is arranged between instructor and student outside of classroom instruction.

CONFIRMATION EMAIL WILL BE SENT UPON ACCEPTANCE INTO SESSION

For any questions, please call/leave a message at **314-854-6600** and your call will be returned.

Return bottom of this form to the CHS front receptionist; space is limited so please register early

Make checks payable to: The School District of Clayton

DRIVERS EDUCATION ENROLLMENT FORM FOR 2023-2024

Student's Name: _____ Current Grade: 9 10 11 12

Session (**circle one**): Fall Winter Spring Summer1 Summer2

Address: _____

Date of Birth: _____ Phone: _____ School: _____

Parent: _____ Signature: _____

Email (**please print clearly**): _____

Covid 'Permission & Waiver' submitted: Y / N (to be filled in by Drivers Ed representative)