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**DMV Transportation Safety Office**

**Driver Education Program**

**Approved Provider Application**

The Approved Driver Education Program refers only to traffic safety education provided to teens ages 15 through age 17, with an Oregon instruction permit, who have not received a driver license.

**No courses can begin prior to the ODOT-DMV TSO approval date.** Please allow 3 weeks for processing. Submit the original, signed application, with required enclosures, to **ODOT DMV-Transportation Safety Office, Driver Education Program, 1905 Lana Ave NE, Salem OR 97314**. Maintain a copy for your records. Or submit electronically to [ODOTDEMail@odot.oregon.gov](mailto:ODOTDEMail@odot.oregon.gov). (If your combined attachments are larger than 10 MB, you may need to break into smaller submissions).

Complete all portions of the application.

**Program information**

|  |  |
| --- | --- |
| Program name: Click here to enter text. | |
| Business Address: Click here to enter text. | |
| Program Coordinator: Click here to enter text. | Phone: Click here to enter text. |
| Alternate phone: Click here to enter text. | Email: Click here to enter text. |

**Program type**

|  |  |  |  |
| --- | --- | --- | --- |
| Commercial Driver Training School, with valid DMV certificate | | | |
| School District / ESD | County | | |
| Community College | Other Click here to enter text. | | |
| The program intends to contract in-car or classroom instruction: Click here to enter text. | | **Y** | **N** |
| If yes: Provide contractor name: Click here to enter text. | | | |

**Requirements** Indicate your understanding of the following requirements by responding to each:

|  | | Y | N |
| --- | --- | --- | --- |
| 1. Each student must have an Oregon Learners Permit by the date of the first classroom session and throughout the duration of the course | |  |  |
| 1. The program must provide: | 30 hours classroom seat time |  |  |
|  | 6 hours behind-the-wheel instruction |  |  |
|  | 6 hours active backseat observation |  |  |
| 1. Parent participation is required, including a parent meeting and 5 hours home guided practice | |  |  |
| 1. Classroom and in-car instruction must be well integrated and concurrent | |  |  |
| 1. A course must be between 35-180 days in length | |  |  |
| 1. Motor vehicles must be: | Registered and properly insured |  |  |
|  | Maintained in good mechanical condition / meet OR vehicle code |  |  |
| 1. Vehicles must be equipped with: | Student driver signs |  |  |
|  | Instructor rear-view and eye-check mirrors, instructor brake |  |  |
|  | Student rear-view and side mirrors |  |  |
|  | Fire extinguisher, First Aid kit and flares or approved reflectors |  |  |
| 1. A provider may only allow an individual with a valid Approved Instructor certificate to teach an approved teen course. | |  |  |
| 1. Records clearly documenting program requirements must be maintained for each student | |  |  |
| 1. Periodic inspections are scheduled for every approved provider | |  |  |
| 1. A provider or designee may not falsify any document or make a misrepresentation on an application or record | |  |  |

|  |  |
| --- | --- |
| *I understand that all requirements in OAR 737-015-0010 thru 0130, must be met.*  Click here to enter text. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Program Coordinator or other Authorized Person** | Click here to enter text.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date** |

**Checklist** The following must be submitted for ODOT-DMV TSO approval:

|  |
| --- |
| Behind the wheel lesson plan for each in-car session |
| Written drive route for each in-car session |
| Driving assessment form used to evaluate each in-car session |
| Final drive assessment / route along with the Final Drive Worksheet Form (identifies the location of each required maneuver) for each final route |
| Classroom lesson plans (**Or check** if theOregon Curriculum Playbook® will be fully implemented as the school curriculum) |
| Flow chart showing integration between classroom and behind-the-wheel sessions |
| Name and Approved Instructor certification number for each instructor who will teach in the approved program |
| Signed Assurance Form, found on the ODOT-TSO’s website: https://www.oregon.gov/odot/Safety/Pages/DE-Provider.aspx |

ODOT-TSO use only:

Approved

Conditionally Approved – Resolution Date Click here to enter text.

Not approved, as noted

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Signature, Driver Education Program Manager Date