


## COMPLETING THE REIMBURSEMENT APPLICATION

Indicate whether you are a public or private provider.

	<b>APPLICATION FOR REIMBURSEMENT FOR DRIVER EDUCATION PROGRAM</b>	<b>SHOW INSTRUCTIONS</b>
		<input type="checkbox"/> Public Provider <input type="checkbox"/> Private Provider

Enter the earliest date of your requested courses and the latest completion date.

For Course Name: list the date range for all entries within DMV2U for which you are requesting reimbursement. **IMPORTANT:** You must also include a list of student names who've completed your courses for which you're claiming on this reimbursement form. TSO will pull a list from DMV2U and match it with your included list.

**EXAMPLE:**

For courses beginning on 01/05/2025	and ending by 04/30/2025	Date Range: 01/05/25-04/30/25 (39)
<small>MM/DD/YYYY</small>	<small>MM/DD/YYYY</small>	<small>COURSE NAME (NO IT APPEARS IN QUES) LIST ALL COURSES THAT APPLY</small>

In the following section, you will list all provider information, including phone numbers, address, email, etc.

### Provider information

NAME OF PROVIDER	DRIVER ED COORDINATOR NAME	ALTERNATE DRIVER ED CONTACT
ADDRESS	COORDINATOR PHONE	ALTERNATE PHONE
CITY, STATE, ZIP	COUNTY	E-MAIL ADDRESS

### Driver education contractor information (if applicable)

NAME OF CONTRACTOR	CONTRACTOR PHONE	CONTRACTOR CONTACT PERSON NAME
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## GENERAL INSTRUCTIONS

**IMPORTANT:** All income and expenses listed on the application must be relevant to the time period listed on the front page. If your application covers a time period of six months, do not list expenses for 9 months or 12 months, etc.

**NOTE:** Any time you see a field with a -/+ behind it, you can click on the + icon to add more rows or on the - icon to delete a row.

## REIMBURSEMENT REQUEST OVERVIEW

Field 1 In this field, enter the total number of students you are claiming for reimbursement. This number should match the total number of students in all courses listed in the Course Name section above.

**EXAMPLE:**

<b>Reimbursement request overview</b> <i>(Some fields in this section populate automatically from the worksheets below.)</i>	
1. Total number of driver education students completing a minimum of 30 hours of instruction, 6 hours of practice driving, 6 hours of behind-the-wheel observation, and 5 hours of supervised home practice	39

This next section is for reporting how many students received the Free/Reduced Subsidy. The majority of the time, the amount in Field 7 will be \$75, the maximum amount allowed per student. Some schools offer a smaller amount, because the course cost is very low to begin with.

Field 8 The number of students who qualified for the F/R Subsidy.

Field 9 Will auto-calculate.

Fields 10 & 11 Will be completed only if you have an Adaptive Strategies agreement on file with the Driver Education Program Office at ODOT. In most cases, these are left blank.

Free and reduced scholarship:	
7. Amount of individual low-income/no-income scholarship <i>(max \$75 per student)</i>	
8. Number of students that qualify	
9. Free and reduced subsidy total amount <i>(Line 7 times Line 8)</i>	
Adaptive package adjustment:	
10. Expense related to geographic/demographic consideration <i>(per pupil)</i>	
11. Number of students that qualify	
12. Adaptive package additional subsidy total <i>(Line 10 times Line 11)</i>	

**EXPENSE SUMMARY WORKSHEET**

**NOTE:** Page 6 of this walkthrough contains a sample list of acceptable income / expense categories. Items not on this list may still qualify; these are just suggestions. If you're not sure about an item, email us at [ODOTDEMail@odot.oregon.gov](mailto:ODOTDEMail@odot.oregon.gov) with your question.

**EXPENSE SUMMARY WORKSHEET**

1. Teacher salaries chargeable to driver education, prorated from total salaries	
a. Classroom teacher <i>(personnel costs, benefits, and other costs)</i>	
b. Behind-the-wheel teacher <i>(personnel costs, benefits, and other costs)</i>	
c. Administrative costs <i>(personnel costs, benefits, and other costs)</i>	
Salary expenses, Expense Subtotal 1:	

Field 1a All costs for the classroom teacher, including salary, benefits and other costs

Field 1b All costs for the behind-the-wheel teacher including salary, benefits and other costs

Field 1c All costs for administrative work including salary, benefits and other costs

<b>2. Vehicle expenses</b>					
a. Lease or rental costs of training car(s)		Number of cars:	Total costs for this claim:		
b. Insurance costs for all vehicles used for this claim					
c. Vehicle (complete a line for each vehicle used in driver education; click "+" to add a line)					
	VEHICLE REFERENCE OR NAME	VEHICLE YEAR	PURCHASE DATE	DEPRECIATION COST THIS VEHICLE	
1					- +
2					- +
3					- +
Total vehicle depreciation costs:					
d. Vehicle expenses (gas, oil, maintenance, equipment)					
Vehicle expenses, Expense Subtotal 2:					

- Field 2a Enter the number of cars being leased or rented and then the total costs for this claim
- Field 2b All insurance costs for vehicles included on this claim
- Field 2c List all vehicles used in the program, including a number or id you use to reference each vehicle, the vehicle year, purchase date and any depreciation for the time period covered in the claim
- Field 2d All maintenance and operation costs not included in the previous fields

<b>3. Instructional materials and equipment expenses</b>	
a. Instructional materials and equipment (course texts, CDs, notebooks, computers, etc.)	
Instructional materials and equipment expenses, Expense Subtotal 3:	\$0.00

- Field 3a All costs related to instructional materials and expenses (e.g. a laptop and/or projector for use in providing the curriculum, etc.)

<b>4. Administrative and non-salary expenses</b>			
a. Advertising and memberships (can include corporate and individual memberships in associations)			
b. Facility rental			
c. Conference attendance expenses (not covered through other means; i.e. WOU for PacNW)			
d. Supplies (paper, office supplies, photocopying services, etc.)			
e. Other expenses (bank fees, professional fees, internet and web site, other non-salary items)			
	DESCRIBE EXPENSE	COST	
1			- +
Administrative expenses, Expense Subtotal 4:			
Expenses Total:			\$0.00

- Field 4a All costs associated with advertising your program, dues for memberships to professional organizations related to driver education such as ADTSEA, etc.
- Field 4b All costs related to facility rental. If a classroom or office is rented for the purpose of delivering the driver education program, these costs can be listed here

- Field 4c All costs associated with attendance at a driver education or traffic safety related conference if the conference content relates to driver education or traffic safety
- Field 4d All costs related to supplies for the program (e.g. copy paper, photocopying, pencils, and other office supplies, binders, etc.)
- Field 4e Other expenses, including web hosting fees, bank fees, professional fees for driver education continuing education courses, etc.) *Hint: See page 6 for a list of allowable/unallowable expense categories. This list is not exhaustive; it is meant to be an example. If you are unsure if an expense is allowable, please contact ODOT to inquire.*

Expenses Total This field will auto-populate

## INCOME SUMMARY WORKSHEET

INCOME SUMMARY WORKSHEET				
It is important that you show reduced tuition in the "Tuition Amount" box for those students who have accessed the free and reduced subsidy. Example: You normally charge \$250 per student, and 7 students used the subsidy; your sheet should show 7 students at \$175 and the rest of the students at \$250.				
1. Tuition		TUITION AMOUNT	NUMBER OF ENROLLMENTS	TOTAL
	1			
Tuition income, Income Subtotal 1:				
2. Fees		FEES COLLECTED		AMOUNT
	1	Missed class fees		
	2	Lab fees		
	3	Book fees		
	4	Other fees		
Fees income, Income Subtotal 2:				
Income Total:				

- Field 1 List the \$ amount charged for a course and the number of students who were enrolled at that rate. If you have students who are paying different rates, list each rate and the number of students separately.

Example: There are 39 students being claimed for reimbursement. The cost for course delivery is normally \$475. Nine students received the \$75 F&R scholarship. List as follows:

\$475 for 30 students = \$14,250.00

\$400 for 9 students = \$3,600.00

**NOTE:** The number of students listed in the Income Tuition section **must** match the number of students listed on the front page of the application in the course list and in Field 1 of the Reimbursement Request Overview section.

- Field 2 List any fees collected for the noted reasons (missed class fees, lab fees, etc.)

**\*\*Return to the front page\*\***

2. Total driver education costs (from Expense Summary Worksheet)	\$0.00
3. Total driver education tuition, fees and other income (from Income Summary Worksheet)	
4. Total driver education costs less tuition (Line 2 minus Line 3)	\$0.00
5. Total driver education costs with profit (Line 4 plus 12%; commercial driving schools only)	\$0.00
6. Driver education cost per pupil (Line 4 divided by Line 1)	\$0.00

These fields will have auto-populated with the totals for each appropriate section.

- Field 2            Should match the total amount listed for Expenses Total box located after the Expenses Summary Worksheet Section.
- Field 3            Should match the total income amount located at the end of the Income Summary Worksheet Section.
- Fields 4, 5, 6    Will auto calculate based on the figures in Fields 2 and 3.
- Field 6            Will display the driver education cost per student that is claimed in your application. If this amount is less than \$210, you will be reimbursed that amount per eligible student (plus 12% allowable profit, for commercial driving schools only). If this amount is greater than \$210, you will be reimbursed \$210 per eligible student.

<b>Certification and submission</b>			
By typing my name in the signature box below, I certify that:			
<ul style="list-style-type: none"> <li>The information contained in this application is true and correct.</li> <li>Any driver education fees collected and retained have been reported on Line 3 of this application.</li> <li>No part of this claim has been paid prior to this application.</li> <li>A corresponding list of students has been entered electronically in the ODOT Student Data Entry System (SDES).</li> <li>The provider's program complies with all applicable requirements in ORS 336.790 to 336.815 and OAR 737-015.</li> <li>An assurance form has been submitted for the current year prior to submission of this application.</li> </ul>			
I agree that typing my name in the signature box and submitting this application from a password-protected official e-mail account is the equivalent of a manual signature for the purposes of this application.			
PRINT NAME	TITLE	SIGNATURE	DATE
After completing the two worksheets below and the fillable fields on this page, click the Submit button to send the application to ODOT Transportation Safety's Driver Education program.			
<input type="button" value="SUBMIT"/>			

Review all entries and then be sure to sign the document at the bottom. Typing your name in the Signature field will suffice.

Click on the Submit button and the document will be auto-emailed to the [ODOTDEMail@odot.oregon.gov](mailto:ODOTDEMail@odot.oregon.gov) email box.

**REMINDER: Please send a list of students claimed for reimbursement with your application.**

NOTE: For your reference, a SAMPLE completed application with representative information and figures is included below.

**SAMPLE ALLOWABLE / UNALLOWABLE EXPENSES**

*NOTE: This is not an exhaustive list. If unsure about an item, please contact ODOT.*

**Allowable**

- Bank Charges
- Bank Service Charges
- Bookkeeping Expense
- Computer / Internet Expenses
- Credit Card Charges
- Dues & Subscriptions
- Garbage
- Health Insurance
- Office Supplies
- Professional Fees
- Repair & Maintenance
- Telephone
- Temp Service Fees
- Travel Expense
- Utilities

**Unallowable**

- Bad Debt
- Collections
- Donations
- Employee Gifts
- Meals and Entertainment
- Stock Buy Outs
- Uniforms



# APPLICATION FOR REIMBURSEMENT FOR DRIVER EDUCATION PROGRAM

<input type="checkbox"/> Public Provider
<input checked="" type="checkbox"/> Private Provider

For courses beginning on <u>01/05/2025</u> and ending by <u>04/30/2025</u> Date Range: 01/05/25-04/30/25 (39)
<small>MM/DD/YYYY MM/DD/YYYY COURSE NAME (AS IT APPEARS IN SDES) LIST ALL COURSES THAT APPLY</small>

## Provider information

NAME OF PROVIDER Sample Driver Education Co	DRIVER ED COORDINATOR NAME Driver Ed	ALTERNATE DRIVER ED CONTACT
ADDRESS 1234 Main St	COORDINATOR PHONE 555-123-4567	ALTERNATE PHONE
CITY, STATE, ZIP Salem OR 12345	COUNTY Malheur	E-MAIL ADDRESS SampleDE@samplede.com

## Driver education contractor information (if applicable)

NAME OF CONTRACTOR	CONTRACTOR PHONE	CONTRACTOR CONTACT PERSON NAME
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## Reimbursement request overview (Some fields in this section populate automatically from the worksheets below.)

1. Total number of driver education students completing a minimum of 30 hours of instruction, 6 hours of practice driving, 6 hours of behind-the-wheel observation, and 5 hours of supervised home practice	39
2. Total driver education costs (from Expense Summary Worksheet)	\$41,850.00
3. Total driver education tuition, fees and other income (from Income Summary Worksheet)	\$17,975.00
4. Total driver education costs less tuition (Line 2 minus Line 3)	\$23,875.00
5. Total driver education costs with profit (Line 4 plus 12%; commercial driving schools only)	\$26,740.00
6. Driver education cost per pupil (Line 4 divided by Line 1)	\$612.18
Free and reduced scholarship:	
7. Amount of individual low-income/no-income scholarship (max \$75 per student)	\$75.00
8. Number of students that qualify	9
9. Free and reduced subsidy total amount (Line 7 times Line 8)	\$675.00
Adaptive package adjustment:	
10. Expense related to geographic/demographic consideration (per pupil)	
11. Number of students that qualify	
12. Adaptive package additional subsidy total (Line 10 times Line 11)	

## Certification and submission

By typing my name in the signature box below, I certify that:

- The information contained in this application is true and correct.
- Any driver education fees collected and retained have been reported on Line 3 of this application.
- No part of this claim has been paid prior to this application.
- A corresponding list of students has been entered electronically in the ODOT Student Data Entry System (SDES).
- The provider's program complies with all applicable requirements in ORS 336.790 to 336.815 and OAR 737-015.
- An assurance form has been submitted for the current year prior to submission of this application.

I agree that typing my name in the signature box and submitting this application from a password-protected official e-mail account is the equivalent of a manual signature for the purposes of this application.

PRINT NAME	TITLE	SIGNATURE	DATE
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After completing the two worksheets below and the fillable fields on this page, click the Submit button to send the application to ODOT Transportation Safety's Driver Education program.

SUBMIT

## EXPENSE SUMMARY WORKSHEET

1. Teacher salaries chargeable to driver education, prorated from total salaries						
a. Classroom teacher ( <i>personnel costs, benefits, and other costs</i> )						\$10,000.00
b. Behind-the-wheel teacher ( <i>personnel costs, benefits, and other costs</i> )						\$15,000.00
c. Administrative costs ( <i>personnel costs, benefits, and other costs</i> )						\$5,000.00
Salary expenses, Expense Subtotal 1:						\$30,000.00
2. Vehicle expenses						
a. Lease or rental costs of training car(s)		Number of cars:		Total costs for this claim:		
b. Insurance costs for all vehicles used for this claim						\$1,250.00
c. Vehicle ( <i>complete a line for each vehicle used in driver education; click "+" to add a line</i> )						
		VEHICLE REFERENCE OR NAME	VEHICLE YEAR	PURCHASE DATE	DEPRECIATION COST THIS VEHICLE	
	1	Honda Accord - 001	2015	03/01/2018	\$650.00	
					Total vehicle depreciation costs:	\$650.00
d. Vehicle expenses (gas, oil, maintenance, equipment)						\$450.00
Vehicle expenses, Expense Subtotal 2:						\$2,350.00
3. Instructional materials and equipment expenses						
a. Instructional materials and equipment ( <i>course texts, CDs, notebooks, computers, etc.</i> )						\$1,200.00
Instructional materials and equipment expenses, Expense Subtotal 3:						\$1,200.00
4. Administrative and non-salary expenses						
a. Advertising and memberships ( <i>can include corporate and individual memberships in associations</i> )						\$250.00
b. Facility rental						\$6,500.00
c. Conference attendance expenses ( <i>not covered through other means; i.e. WOU for PacNW</i> )						\$100.00
d. Supplies ( <i>paper, office supplies, photocopying services, etc.</i> )						\$250.00
e. Other expenses ( <i>bank fees, professional fees, internet and web site, other non-salary items</i> )						
		DESCRIBE EXPENSE			COST	
	1	Website			\$1,200.00	
Administrative expenses, Expense Subtotal 4:						\$8,300.00
Expenses Total:						\$41,850.00

## INCOME SUMMARY WORKSHEET

It is important that you show reduced tuition in the "Tuition Amount" box for those students who have accessed the free and reduced subsidy. Example: You normally charge \$250 per student, and 7 students used the subsidy; your sheet should show 7 students at \$175 and the rest of the students at \$250.

1. Tuition			TUITION AMOUNT	NUMBER OF ENROLLMENTS	TOTAL
	1		\$475.00	30	\$14,250.00
	2		\$400.00	9	\$3,600.00
Tuition income, Income Subtotal 1:					\$17,850.00
2. Fees			FEES COLLECTED		AMOUNT
	1	Missed class fees			\$125.00
	2	Lab fees			
	3	Book fees			
	4	Other fees			
Fees income, Income Subtotal 2:					\$125.00



Income Total:		\$17,975.00
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