

HOLY CROSS HIGH SCHOOL DRIVER AND TRAFFIC SAFETY EDUCATION PROGRAM
26-20 Francis Lewis Blvd., Flushing, New York 11358
SPRING 2019 Student Information and Application Form (www.holycrosshs.org)

1. Students must be **16** years of age before **Tuesday, February 5, 2019**.
2. Effective February 22, 2010, New York State Junior Learner Permit holders must have completed 50 hours of supervised driving (15 hours must be after sunset) and must possess a permit for six months before becoming eligible to take a road test.
3. **Students must meet the 24-hour classroom and the 24-hour automobile (6 hours at the wheel and 18 hours observation) instruction requirements for their certificate of completion. ONLY APPROVED CLASS ABSENCES will be rescheduled.**
4. Vehicles used contain all required safety equipment and all are air-conditioned.
5. Full payment must accompany this application. No partial payments will be accepted.
6. Special schedule requests will be accommodated on a first come, **first served basis**.
7. Registration can be completed by mail, telephone or in person. Complete the form in its entirety, including signatures required. Payment: Mailed applications are accepted if accompanied by fee. Checks must be made out to HOLY CROSS HIGH SCHOOL, Attention: Drivers Education **OR** payment can be made with a credit card **for an additional \$10 fee**. One can also e-mail registration as an attachment if paying by credit card to driveder@holycrosshs.org.
8. To guarantee availability, please register as soon as possible.
9. When filling out application form, **use name as it appears on the applicant's birth certificate. Do not use nicknames.**
10. **Classes begin on Tuesday, February 5, 2019, and are scheduled to conclude on Saturday, June 8, 2019.**
11. **Road test arrangements are not included and are the responsibility of the student.**
12. Parent/Guardian with the student **MUST ATTEND a Mandatory Orientation on Friday, February 1, 2019 at 6:30 pm.**
13. **Students are notified as to their exact instruction times at the orientation. LEARNER'S PERMIT IS REQUIRED!**

Tear off and retain top portion for your reference; return bottom portion with fee.

DRIVER EDUCATION at HOLY CROSS HIGH SCHOOL –SPRING 2019 APPLICATION (Please print clearly)

Student's Legal Name (Last, First, MI)	Home Phone	Cell Phone	
Address	City	State	Zip
High School Currently Attending	E-Mail		
Student Signature	Age	Date of Birth	9 digit Permit Number

Scheduling Options are based on a first come, first served basis. You may indicate your preference. Circle Choice.

Before school 6:45 to 8:15 AM Twice a week Tuesdays 2:30 to 5:30 PM Thursdays 2:30 to 5:30 PM

Tuesdays AND Thursdays 4:00 to 5:30 PM Saturdays from either: 7AM to 10 AM or 8:30 AM to 11:30 AM or 10 AM to 1 PM

Parent/Guardian Consent: The student named above has my permission to enroll and participate in the Holy Cross High School Driver and Traffic Safety Education Program. I have read and understand the information provided at the top of this form.

Parent/Guardian Name (Last, First, MI)	Parent/Guardian Signature		
Relationship to Student	Home Phone	Cell Phone	
	E-Mail		

Payment Information: \$10.00 charge will be added for credit card payments

Application Fee: \$615.00 for HCHS Students \$635.00 for Non-HCHS Students

Name as it Appears on Credit Card	CARD TYPE: ...VISA ...M/C ...AMEX ...DISC		
Credit Card Number	V-Code	Expiration Date	

Use reverse side of this application to note special scheduling requests.

Email: driveder@holycrosshs.org

See scheduling options online: <http://www.holycrosshs.org> to Quick Links Driver Education to [Registration Information](#)

