

Louisville Public Schools

2013 Driver Education Program

PO Box 489 * 202 West Third Street

Louisville NE 68037

402.234.3585 * Fax 402.234.2957

February 20, 2014

Students and Parents:

Louisville Schools will again be offering a driver education program this spring/summer. The program will consist of classroom time that will be conducted on:

- ★Sunday, April 27 (1:00 pm – 5:00 pm)
- ★Tuesday, May 27 (10:00 am – 2:30 pm)
- ★Wednesday, May 28 (10:00 am – 2:30 pm)
- ★Thursday, May 29 (10:00 am – 2:30 pm)
- ★Friday, May 30 (10:00 am – 2:30 pm) - may need to change date

Classroom dates will meet in room 224 (high school computer lab #2) and **these dates cannot be missed**. *I must stress the last statement that these classes cannot be missed.*

Students are required to have 20 hours of classroom instruction, a minimum of 5 hours of instruction behind the wheel and a final drive test. We cannot waiver from this state mandate.

Starting on May 27, drive times will be scheduled individually with the instructor, but in order to participate in these lessons, students **must** have a valid permit. If vacation plans happen during the driving lessons, be sure to mention that at the start of class so we can schedule around your family plans.

The cost of this supplemental program is \$260 per student. Payment must be received at the time of registration and should be submitted to our superintendent's secretary, Mrs. Beverly Becker. The deadline for registration is Wednesday, March 28, 2014. Please make checks payable to Louisville Public Schools.

The class is open to students who are fifteen years of age or older, who must have obtained a learner's permit, or those students wanting to obtain a school permit. There are a limited number of spaces available, which will be filled on a first come, first serve basis with registration form and full payment received.

Sincerely,

Wally Johnson
Drivers Education Instructor
wjohnson@lpslions.org

Return by March 28, 2014 2014 Driver's Education Registration

Name: _____ Date of Birth: _____ Age: _____

Address: _____ Phone Number: _____

_____ Permit Number: _____

Parent Signature: _____ Date: _____