

Minor/Adult

# Individual Student Class Record

(C 3052A) School / Branch #

EP E-Z DRIVING SCHOOL Name of School

2220 N. Lee Trevino Dr. Ste. B5 El Paso, TX. 79936 Classroom Address

Printed Name of Student \_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Date of Birth (MM/DD/YY) \_\_\_\_\_ Area Code \_\_\_\_\_ Phone Number \_\_\_\_\_ Driving Permit Number \_\_\_\_\_

**LEGEND:** A = ABSENT P = PRESENT AS = ALTERNATE SCHEDULING MU = MAKE-UP T = TERMINATION W = WITHDREW

Mo.	Day	Yr.	Class Time (i.e. 4:00 – 6:00 PM)	Legend	Day of Training	Module Topics and Sub-Topics	Grade	TA (Full) Initials	DET Initials
		19	__M	P / A	1	Module 1 Traffic Laws <small>Texas Driver Handbook Ch. 1-5</small>			
		19	__M	P / A	2	Module 1 Traffic Laws <small>Road Signs Test</small>			
		19	__M	P / A	3	Module 1 Traffic Laws <small>Road Rules Test</small>			
		19	__M	P / A	4	Module 2 Driver Preparation <small>Ch. 3 &amp; 5</small>			
		19	__M	P / A	5	Module 3 Vehicle Movements <small>Ch. 6-7</small>			
		19	__M	P / A	6	Module 4 Driver Readiness <small>Ch. 14</small>			
		19	__M	P / A	7	Module 5 Risk Reduction <small>IPDE Ch. 4</small>			
		19	__M	P / A	8	Module 6 Environmental Factors <small>Ch. 8-9</small>			
		19	__M	P / A	9	Module 7 Distractions <small>Ch. 10-11</small>			
		19	__M	P / A	10	Module 8 Alcohol and Other Drugs <small>Ch. 15</small>			
		19	__M	P / A	11	Module 8 Alcohol and Other Drugs <small>Ch. 15</small>			
		19	__M	P / A	12	Module 8 Alcohol and Other Drugs <small>Drunk Goggles &amp; Traffic Stop Procedures</small>			
		19	__M	P / A	13	Module 9 Adverse Conditions <small>Ch. 12-13</small>			
		19	__M	P / A	14	Module 10 Vehicle Requirements <small>Ch. 17-18</small>			
		19	__M	P / A	15	Module 11 Consumer Responsibilities <small>Ch. 16</small>			
		19	__M	P / A	16	Module 12 Driver Responsibilities <small>Car Seat &amp; Water Safety &amp; Final Exam</small>			

MAKE-UP LESSONS (No more than 10 hours)


Final Grade \_\_\_\_\_ Total Class Hours 32 Date Started   /  /19 Date Ended   /  /19

• I / We hereby certify that the information contained in this record is true and correct

\_\_\_\_\_  
Signature of Instructor

Daniel Cano  
Printed Name of Instructor

8284  
License Number of Instructor

\_\_\_\_\_  
Signature of Instructor

Luis Rosales  
Printed Name of Instructor

3951  
License Number of Instructor

• I hereby certify that the information contained in this record is true and correct and I am responsible for all classroom instruction shown on this form.

\_\_\_\_\_  
Signature of Teacher of Record

Luis Rosales  
Printed Name of Teacher of Record

3951  
License Number of Teacher of Record

• I hereby certify that I have completed the classroom phase and that the information on this record is true and correct

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Printed Name of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Instructor

Issac E. Ruiz  
Printed Name of Instructor

4638  
License Number of Instructor

TDLR

\_\_\_\_\_  
Signature of Instructor

Arlene Cano  
Printed Name of Instructor

3867  
License Number of Instructor