

ADE \_\_\_\_\_

Adult 6-Hour ADULT CLASSROOM ENROLLMENT CONTRACT

( C 3052 ) EP E-Z DRIVING SCHOOL ( 915 ) 400-4313
School / Branch # Name of School Area Code Phone Number

2200 N. LEE TREVINO DR. STE. B5 EL PASO TX 79936
Classroom Address City State ZIP Code

Printed Full Legal Name of Student Date of Birth (MM/DD/YY) Driver License # ( ) Phone Number

Street Address of Student City State ZIP Code

CLASSROOM INSTRUCTION & DRIVE LESSONS-Course Rate \$350.00 DRIVE LESSONS & DRIVE EXAM-Course Rate \$340.00
CLASSROOM INSTRUCTION WITH 7 HOURS OF DRIVE LESSONS & DRIVE EXAM

Number of Lessons Length of Course 6 Hrs. Length of Lesson, Hrs. Cost per Lesson \$ 50.00 Course Rate \$ 385.00

Payment: \$ Date: Payment \$ Date: Total Amount of Contract \$

Classroom instruction begins on \_\_\_/\_\_\_/\_\_\_ at \_\_\_:\_\_\_ o'clock \_\_M. All classroom instruction must be completed by \_\_\_/\_\_\_/\_\_\_.

DRIVE EXAM ONLY (1) (2) (3) - Course Rate \$ 80.00
DRIVE LESSONS ONLY-Course Rate \$ 300.00 CLASSROOM INSTRUCTION & DRIVE EXAM - Course Rate \$ 150.00
CLASSROOM INSTRUCTION ONLY - Course Rate \$ 85.00

ATTENDANCE POLICY

All classroom instruction, including makeup work shall be completed within the timelines stated on the original student contract

Student's initials All drive lessons must be completed by \_\_\_/\_\_\_/\_\_\_ (120 days) Student's Initials
Drive exam(s) must be completed by \_\_\_/\_\_\_/\_\_\_ (60 days) Student's Initials

MAKEUP POLICY

- A fee of \$45.00 will be assessed (per lesson needed) if aren't completed by contract date. Student Initials
A fee of \$40.00 will be assessed if drive exam is not completed by contract date. Student's Initials

Student's initials- I have been given a copy of the school's make-up policy

GRADING/PROGRESS

Students shall not receive a driver education certificate of completion unless that student received a grade of at least 70% on the highway signs examination and at least 70% on the traffic laws examination as required by Texas transportation Code, 521.161

Student's initials

RULES OF OPERATION AND CONDUCT

Persons age 18 to under 25 years of age must successfully complete either a minor and adult driver education course or the driver education course exclusively for adults. Partial completion of the course does not satisfy the requirements of rule or law. A student or prospective student may be dismissed or barred from the class for tardiness; drunkenness or consumption of alcohol on the premises; rude, vulgar or disruptive behavior; smoking or using tobacco products; or being generally inattentive (sleeping, reading, etc.) during class. Students terminated for violating rules of conduct may be readmitted at the discretion of the school owner or director.

Student's initials

CANCELLATION POLICY

A full refund of all money paid by a student if the student cancels the enrollment contract before midnight of the third day, other than a Saturday, Sunday, or legal holiday, after the date the enrollment contract is signed by the student, unless the student successfully completes the course or receives a failing grade on the course examination; or the enrollment of the student was procured as a result of a misrepresentation in advertising or promotional materials of the school or course provider; or a representation made by an owner or employee of the school or course provider

Student's initials

No Show Fee/No Permit

A fee of \$40.00 will be assessed at every occurrence if student is scheduled for a drive lesson and does not show up or call to cancel drive lesson at least 24 hours in advance. Also if student shows up to drive lesson without permit. (no student will be driven without permit)

Student's Initials

ADE-1317 Certificate Replacement

If student loses or misplaces the certificate issued, a fee of \$50.00 will be charged to re-issue a new one.

Student's Initials

**REFUND/TERMINATION/DISCONTINUED COURSE POLICY:**

- Refunds are based on the period of enrollment computed on the basis of course time expressed in clock hours;
- The effective date of the termination for refund purposes will be the earliest of the following: (a) the last day of attendance, if the student is terminated by the school; (b) the date of receipt of written notice from the student; or (c) the 10<sup>th</sup> school day following the last day of attendance.
- If tuition is collected in advance of entrance and, if a student does not enter the school, terminates enrollment, or withdraws, the school: (a) may retain not more than \$ 50.00 as an administrative expense; and (b) shall refund that portion of the classroom tuition and fees and behind-the-wheel tuition and fees that correspond to services the student does not receive
- The school shall refund items of extra expense to the student, including instructional supplies, books, laboratory fees, service charges, rentals, deposits and all other charges not later than the 30<sup>th</sup> day after the effective date of enrollment if: (a) the extra expenses are separately stated and shown in the information provided before enrollment; and (b) the student returns to the school any property in the student's possession and
- A full refund of all tuition and fees is due and refundable in each of the following cases:  
(a) when an enrollee is not accepted by the school; (b) if the course of instruction is discontinued by the school at this location; or (c) if the student's enrollment was procured as a result of any misrepresentation in advertising, promotional materials of the school, or misrepresentation by the owner or representation of the school.

**STUDENT ACKNOWLEDGMENT**

\_\_\_\_ **Student's Initials** - I have been furnished a copy of the school tuition schedule; cancellation and refund policy; and school regulations pertaining to absence, grading policy, progress, and rules of operation and conduct

\_\_\_\_ **Student's Initials** - A licensed school or instructor may not issue an ADE-1317 adult driver education certificate to a person who is not at least 18 years of age.

\_\_\_\_ **Student's Initials** - This agreement constitutes the entire contract between the school and the student, and assurances or promises not contained herein shall not bind the school or the student

\_\_\_\_ **Student's Initials** - I further realize that any grievances not resolved by the school may be forwarded to Texas Department of Licensing and Regulation Attention: Enforcement Division PO BOX 12157 Austin, TX 78711; Emailed to [Intake@tdlr.texas.gov](mailto:Intake@tdlr.texas.gov) or file online at [www.tdlr.texas.gov/complaints](http://www.tdlr.texas.gov/complaints)

**READ ENTIRE CONTRACT BEFORE SIGNING**

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

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of School Representative

\_\_\_\_\_  
Signature of School Representative

\_\_\_\_\_  
Date

**Adult 6-Hour**

**INDIVIDUAL STUDENT CLASSROOM RECORD**

(C 3052 )  
School / Branch #

EP E-Z DRIVING SCHOOL  
Name of School

2200 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 (if applicable)

ATTENDANCE LEGEND: A = ABSENT P = PRESENT MU = MAKE-UP

Class Date(s) (MM/DD/YY)	Class Time(s) (e.g. 1:00 – 7:00 PM)	Attendance	Topic	Instructional Topics	Instructor's Initials
/ / 22	M	P/A	1	Introduction	
/ / 22	M	P/A	2	Your License to Drive	
/ / 22	M	P/A	3	Right-of-Way	
/ / 22	M	P/A	4	Traffic Control Devices	
/ / 22	M	P/A	5	Controlling Traffic Flow	
/ / 22	M	P/A	6	Alcohol and Other Drugs	
/ / 22	M	P/A	7	Cooperating with Other Roadway Users	
/ / 22	M	P/A	8	Managing Risk	
/ / 22	M	P/A	9	Classroom Progress Assessment	

Must total 6 hours

Road Rules Exam \_\_\_\_\_

Road Signs Exam \_\_\_\_\_

Total Class Hours 6 / 3

- I / We hereby certify by signature that the information contained in this record is true and correct.

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

Daniel Cano  
Printed Name of Instructor

\_\_\_\_\_  
License Number of Instructor

8284

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

Arlene Cano  
Printed Name of Instructor

\_\_\_\_\_  
License Number of Instructor

3867

- 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

Daniel Cano / Luis Rosales / Arlene Cano  
Printed Name of Teacher of Record

\_\_\_\_\_  
License Number of Instructor

8284 / 3951 / 3867

- I hereby certify that I have completed the entire six (6) hour course and the information on this record is true and correct.

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

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

\_\_\_\_\_  
Date



Minor / Adult

### Individual Student In-Car Record

(C 3052 )  
School / Branch #

EP E-Z DRIVING SCHOOL  
Name of School

2200 N. LEE TREVINO DR. STE. B5  
Classroom Address

EL PASO  
City

TX  
State

79936  
ZIP Code

Printed Name of Student

Street Address

City

State

ZIP Code

Date of Birth (MM/DD/YY)

Driving Permlt Number

Expiration Date

Area Code

Phone Number

Mo.	Day	Yr.	Driving Time (i.e. 4:00-6:00 PM)	TOPICS AND TIMES Based on one hour of driving and one hour of observation per day.	Grade	Drive	Observe	Lesson #	Instructor's Initials
		22	M	Driver Preparation ..... 30 min. Vehicle Movements ..... 30 min. Simulation ..... 90 min.				1	
		22	M	Vehicle Movements ..... 15 min. Driver Readiness ..... 30 min. Risk Reduction ..... 15 min. Simulation ..... 120 min.				2	
		22	M	Risk Reduction ..... 30 min. Environmental Factors ..... 30 min. Simulation ..... 120 min.				3	
		22	M	Environmental Factors ..... 45 min. Distractions ..... 15 min. Simulation ..... 120 min.				4	
		22	M	Distractions ..... 60 min. Simulation ..... 90 min.				5	
		22	M	Alcohol and Other Drugs ..... 30 min. Adverse Conditions ..... 30 min. Simulation ..... 90 min.				6	
		22	M	Vehicle Requirements ..... 30 min. Consumer Responsibility ..... 15 min. Driver Responsibility ..... 15 min. Simulation ..... 90 min.				7	

NO SHOWS:


• 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	_____ Printed Name of Instructor	_____ License Number of Instructor
_____ Signature of Instructor	_____ Printed Name of Instructor	_____ License Number of Instructor

• I hereby certify that I have completed the entire course and that the foregoing statements on this record are true and correct.

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

\_\_\_\_\_  
Date

