## MINNESOTA DEPARTMENT OF PUBLIC SAFETY



## DRIVER EDUCATION

## CERTIFICATE OF ENROLLMENT AND CLASSROOM COMPLETION



(Must be completed by a school official) ANY ALTERATION WILL VOID CARD

Has completed the classroom phase and is enrolled in a behind-the-whee program licensed or approved by the Department of Public Safety.  Name of School  Location (City)  MN  Zip Code  MN  Name of Licensed or Approved Instructor  If this student fails to continue or complete the behind-the-wheel phase of the curriculum, I will immediately notify the Office of Driver Education of the Minnesota Department of Public Safety.  I certify that the above information is true and correct.  Name of Authorized Signer (must be printed or typed)  Date Issued  NOTE: MUST BE PRESENTED TO EXAM STAFF ALONG WITH PROPE IDENTIFICATION WHEN TAKING KNOWLEDGE TEST (see Minneson Driver's Manual).	Student's Legal Name (first, middle, last)		
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