

## Pro Driving School



### Student Record

Student Name \_\_\_\_\_ Student's Driver's Licence # \_\_\_\_\_  
Address \_\_\_\_\_ Phone number \_\_\_\_\_  
\_\_\_\_\_

#### Classes Attended

| Date  | Time  | Length (Hrs:Mins) |
|-------|-------|-------------------|
| _____ | _____ | _____             |
| _____ | _____ | _____             |
| _____ | _____ | _____             |
| _____ | _____ | _____             |
| _____ | _____ | _____             |
| _____ | _____ | _____             |
| _____ | _____ | _____             |
| _____ | _____ | _____             |
| _____ | _____ | _____             |
| _____ | _____ | _____             |

#### Tests Completed

| Date  | Test Score |
|-------|------------|
| _____ | _____      |
| _____ | _____      |
| _____ | _____      |
| _____ | _____      |
| _____ | _____      |
| _____ | _____      |

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

\_\_\_\_\_  
Instructor's Signature

#### Instructor Information

Instructor Name \_\_\_\_\_ Instructor's D.I. Permit # \_\_\_\_\_  
Expiry Date: \_\_\_\_\_