

Pro Driving School

258C Sunview St
Waterloo, ON N2L 0H8
Phone: (519) 954-8541

Student Application Form

1. Name

Last Name

First Name

2. Date of Birth

yyyy-mm-dd

3. Sex

☐

Male

☐

Female

4. Phone Number

Home

Cellphone

5. Home Address

Nr, Street

Apartment

City

Province

Postal Code

6. Driver's License

Number

Date Issued (yyyy-mm-dd)

Class

Expiry Date (yyyy-mm-dd)

7. How Did You Find Us?

☐ Friends ☐ Internet ☐ Newspaper ☐ Flyer ☐ Walk-in ☐ Commercial

8. Applicant Signature

I certify that the statements in this document are accurate and consent to the release of any information contained herein to the Ministry of Transportation, Insurance Bureau of Canada, and the MTO course inspector.

Signature: _____ Date (yyyy-mm-dd): _____

Payment:

| Year | Month | Day | Cash \$ | Check/Credit | Received by | Notes |
|------|-------|-----|---------|--------------|-------------|-------|
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