

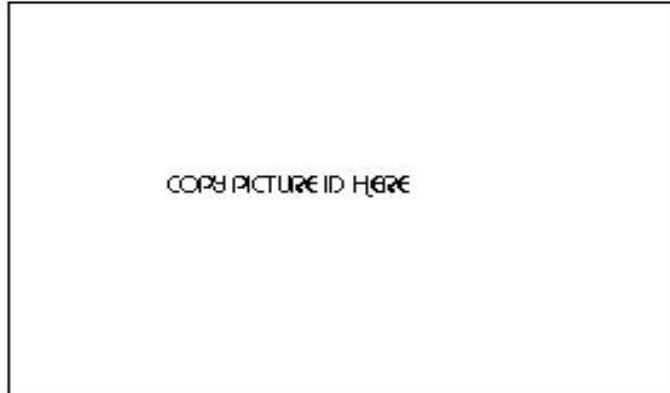
TDLR
Division of Driver Training STUDENT AFFIDAVIT
Text to 737-888-4863 or
email to info@driversafetyusa.com

I, _____, _____,
Legal Name (printed or typed) *Mailing Address*

_____, _____, _____
City *State* *Zip Code*

_____,
Driver's License Number (if applicable)

_____,
State Issuing Driver's License



Make the following statement:

I have read and accepted the DriverSafety USA (Safety-USA.com) Student Enrollment Form and Agreement for the DriverSafety USA Courseware.

I personally attended and completed the afore-mentioned six-hour driving safety course in accordance with the policies and procedures of the course. I did not receive any assistance to complete this course other than assistance from the school's technical support staff and instructors. I have not attempted to misrepresent my identification in any way while taking this driving safety course. A copy of my driver's license or equivalent type of photo identification is shown on this page.

Signature

STATE OF _____

COUNTY OF _____

Personally appeared before me, the above-named, known to me, who provided the document copied above, and who being duly sworn, deposes and says that he/she executed this affidavit and that the statements and representations contained therein are true and correct to the best of his/her knowledge and belief.

SUBSCRIBED AND SWORN before me this _____ day of _____, 20_____.

Notary Public (signature)

COMMISSION EXPIRES: _____