

Virginia Driving School, Inc.

WWW.VADRIVINGSCHOOL.COM

Corporate Office

8807 Sudley Road Suite 214, Manassas, VA 20110 703-367-0911

Springfield Office

7011 Calamo St. Suite 209, Springfield, VA 22150 703-367-0970

Driver's Education Classroom Agreement:

Please Print all the required information:

Re-Certification (Failed 3 attempts at DMV)

First Time (Never Tested at DMV)

This agreement is entered into this _____ day of _____, 20____ between Virginia Driving School, Inc. and

Full Name: _____
Last First Middle

Birth Date: ___/___/___ Male___ Female___ Student Email: _____

Permit/License Number: ___-___-___ Issue Date: ___/___/___ Exp. Date: ___/___/___

Address: _____ City/State/Zip: _____

Home Phone Number: (____)____-____ Cell Phone: (____)____-____

Parent Email: _____ High School Name: _____

Parent / Guardian Address: _____

Emergency Contact Person: _____ Phone Number: (____)____-____

Are you taking any medications: Yes___ No___(if yes, please describe)_____

List any other medical conditions or learning disabilities: _____

The following conditions need to be understood before enrolling.

1. Course consists of 36 periods of classroom instruction for students, at cost of \$215.00 (Each period is fifty minutes long).
2. Students will receive no more than (4) periods of instruction on Saturday, Sunday and holidays, and no more than (2) periods of classroom instruction on regular school days.
3. Student will be notified by phone or email or via website in the event the school cancels classes. Cancelled classes will be made up at the end of the course or during an alternate day.
4. On weekends class is held from 5:00 p.m. to 9:00 p.m. and 6:00 p.m. to 8:00 p.m. on regular school day.
5. A refund of all fees paid will be made, upon request, if school is not capable of or willing to begin instruction within 30 calendar days from the date agreed to in

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the contract.

6. This contract is valid for 4 months from the first classroom session. Meaning student must complete the 36 hours course and if not completed, student will be required to re-register and pay the fee of the course again.
7. School does not guarantee that any student will pass the state license examination or that the student can secure a license or that student will be guaranteed employment upon completion of any course instruction.
8. A **Fee of \$45.00** will be charged for any insufficient fund or stop payment check that is returned by a bank. Issuer of the check will be responsible for legal expenses.
9. Lost or misplaced DTC-B will be re-issued for free. However, Administrative **fee of \$25.00** will be charged for processing your request.
10. Students are fully accountable for their conduct. Any damage done by a student to school property, building, or parking lot will result in the student being immediately expelled from the program with **NO refund and DMV will be notified**. Any payment necessary for the damage will be the responsibility of the student or parent and/or guardian. Criminal activity will be reported to the local authorities, as well as the student's parent/guardian.
11. Sleeping, talking or cell phone use is not allowed during class lectures, videos, or in the automobiles during drive or observation time. Anyone found sleeping; talking or using cell phone during these times will be considered absent and will not be given credit for their attendance. All students hereby agree to keep areas in the building, classroom; parking lot and automobiles clean from all litter and debris.
12. Any student suspected of being under the influence of alcohol or drugs while attending class or road instruction will be immediately expelled from the program. A conference will be held with their parent/guardian as well as the local law enforcement officials being contacted. Also, **NO refund and DMV will be notified**.
13. **ATTITUDE** and **MATURITY** are an important part of this course. Any student who is found DISRUPTIVE or DISRESPECTFUL to instructor, other students or anyone associated with Virginia Driving School shall be dismissed by the instructor at the instructor's discretion. **NO refund** from the program will be given.
14. It is the responsibility of the student or in the case of minor the parent or legal guardian to report to Department of Motor Vehicles any concerns regarding school facilities, instructor behavior or quality of instructions by the school.

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Refund Policy is as follows:

For notice of withdrawal received prior to the first day of Drivers Education classes and Behind the Wheel Lessons for the scheduled session, a refund of one hundred percent of total tuition will be granted for both Drivers Education and Behind The Wheel students minus the **\$25.00** for processing. For notice of withdrawal received on the first day of classes/lessons and through Second day of classes/lessons that session, a refund of fifty percent of total tuition minus **\$25.00** for processing fee applicable to the courses for which registered will be granted for Drivers Education and Behind The Wheel students. For a reduction in load which occurs on the first day of classes and through the Second scheduled day of that session, fifty percent of the difference of the tuition applicable to the original and revised course schedule will be refunded.

No refund of tuition will be granted for either Drivers Education or Behind the Wheel students beyond the Third day of a class and/ or Driving Lesson. The request of refund must be in writing and be submitted within 3 days of the 2nd class or lesson taken. You can fax your request to Admission at 1-866-469-7538 or Email to info@vadrivingschool.com.

Students Covered

For purposes of the refund policy outlined above, an individual is considered a student when he or she has registered and paid, in part or full, either by cash or by obligation, by the first day of class.

We have read this contract and agree to abide by the conditions:

Student's Signature _____ Date ____/____/____

Parent or Legal Guardian Signature Date ____/____/____

VA Driving School Rep Signature Date ____/____/____

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I hereby request that my son/daughter _____, be enrolled in a state-approved **Driver Education** classroom instruction program.

_____ Date ____/____/_____
Parent or Legal Guardian Signature

DMV is committed to promoting transportation safety through the certification of quality driver training programs. If you have comments or concerns about this course, call toll free number:

1-877-885-5790.

Attention Parents / Guardians / Students:

- ✓ If the student has sports, after school activities, work etc, and you know the schedule of these activities; we would appreciate if you could let the office know in advance.
- ✓ We encourage parents to be involved in the student's progress. You are paying for this service, please be involved and make sure your child is getting the full benefit of this service.
- ✓ Please feel free to call the office or ask the instructor about your child's improvements during the course.
- ✓ If you have any comments or concerns, please give us a call to discuss the issue. Ph: 703-367-0911/540-341-8881 or email us at info@vadrivingschool.com.

For Office Use Only

Date: ____/____/____ Amount Paid _____
Check # _____ Cash _____ Money Order# _____

VA Driving School Rep Signature