

Negaunee Public Schools

101 Pioneer Ave, Negaunee, MI 49866 906-475-4156

State Certification # P000070 • NHS Office Hours: Monday – Friday, 7 a.m. – 3:30 p.m.

Program Number #: 21-2-09/13 **TEEN SEGMENT 2 CONTRACT** Classroom Location: Negaunee High School

Student: (last) _____ (first) _____ (middle) _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Age: _____ D.O.B.: _____

Parent/Legal Guardian's Name: _____ Phone #: _____

Parent/Legal Guardian's Address: _____ City: _____ Zip: _____

Emergency Contact: _____ Phone #: _____

Dates: September 13th, 14th, & 15th, 7:00 – 9:00 PM | **Location:** NHS Library

TEEN SEGMENT 2 PROVISIONS

1. Negaunee Public Schools will provide a minimum of 6 hours of classroom instruction with a certified Michigan Driver Education Instructor. Classroom instruction shall not exceed 2 hours per day.
2. A driving log must be presented to verify that the student has completed a minimum of 30 hours of driving (including 2 hours at night) with a licensed parent/guardian or a designated licensed adult driver 21 or older. A log was presented to the Segment 2 instructor on or before the first classroom session.

Parent or Student initials _____ Segment 2 Instructor initials _____

3. The Student must have held a Level 1 License for not less than 3 continuous months.

Parent or Student initials _____ Segment 2 Instructor initials _____

Segment I Certificate # _____

TEEN SEGMENT 2 TERMS

1. The Parent or Legal Guardian agrees to pay the total amount of **\$50 on the first day of class** in the form of cash or check made out to NPS.
2. The Student may miss class only for an illness or emergency with documented proof presented to the instructor. The student is required to make up class time missed. Make up times will be from 2:46-3:46 Tuesdays and Wednesdays in NHS Library

REQUIREMENTS TO PASS THE COURSE

1. The Student must take part in daily quizzes/test.
2. The Student will be allowed up to two attempts to pass the State Exam, which requires a score of at least 70%.

REFUND POLICY

1. After the beginning of the second class session, NO REFUND shall be given.

ACCOMMODATIONS/MEDICAL CONDITIONS

1. Does the Student require any special accommodations to participate in the classroom phase (e.g., test being read, interpreter, etc.)? Yes ☐ No ☐ If Yes, please explain: _____

Date: _____ Student Signature: _____

Date: _____ Parent/Legal Guardian Signature: _____

Date: _____ Negaunee Public Schools By: _____ Designated Representative _____

*****This form must be turned in to the NHS office no later than Thursday, September 9th*****

NOTICE - This provider is required to be certified by the Secretary of State. If you have any complaint that cannot be settled with the provider, please complete the Driver Education Complaint form found on the Department of State website; www.michigan.gov/teendriver. Completion of driver education instruction does not guarantee qualification for a driver license.