

FOR TDLR USE ONLY:

Fee Paid: _____

Date Paid: _____

Receipt #: _____

Initials: _____

**APPLICATION FOR
DRIVER EDUCATION COURSE EXCLUSIVELY FOR ADULTS
(SIX-HOURS)**

**TITLE 5, TEXAS EDUCATION CODE, CHAPTER 1001
TEXAS DRIVER AND TRAFFIC SAFETY EDUCATION**

APPLICATION FEE: \$500

APPLICATION FEE IS NON-REFUNDABLE

TEXAS DEPARTMENT OF LICENSING & REGULATION
P O BOX 12157
AUSTIN TX 78711-2157

(800) 803-9202 (512) 463-6599

AUTHORITY FOR DATA COLLECTION: Title 5, Texas Education Code, Chapter 1001.

PLANNED USE OF DATA: To provide information necessary to determine if the adult driver education course meets the criteria for approval under Chapter 1001, Texas Driver and Traffic Safety Education.

INSTRUCTIONS: The Department will not act upon any application until all documentation and fees have been received. If additional clarification is required, contact customer service 800-803-9202 or 512-463-6599.

MAIL CHECKS AND ALL ATTACHMENTS WITH THIS APPLICATION TO:

REGULAR MAIL:

TX DEPT OF LICENSING AND REGULATION
P O BOX 12157
AUSTIN TX 78711-2157

FOR OVER-NIGHT EXPRESS MAIL:

TX DEPT OF LICENSING AND REGULATION
920 COLORADO ST
AUSTIN TX 78701

1. LEGAL NAME OF DRIVER EDUCATION SCHOOL AND SCHOOL LICENSE NUMBER:

_____ (C) _____

2. LICENSE NUMBER(S) OF BRANCH SCHOOL(S) THAT WILL OFFER COURSE: (ADDITIONAL FEE OF \$25 PER BRANCH)

3. LEGAL NAME OF SCHOOL OWNER:

4. CONTACT INFORMATION FOR SCHOOL OWNER:

(_____) _____ (_____) _____ E-Mail _____
Telephone Facsimile

5. TYPE OF DELIVERY:

Traditional classroom

6. REQUIRED DOCUMENTS:

- INVENTORY OF EDUCATION RESOURCES AND MULTI-MEDIA (if applicable) (Form ADE-225)
- NOTARIZED APPLICATION (Form ADE-6HR-TDM)
- SIX-HOUR ADULT DRIVER EDUCATION COURSE SYLLABUS
- COURSE CONTENT GUIDE (if applicable)
- ADULT CLASSROOM ENROLLMENT CONTRACT
- STUDENT INSTRUCTION RECORD
- DRIVER EDUCATION FEE SHEET AND FEE(S) (DE-299)

X _____
Signature of School Owner Typed or Printed Name of School Owner

STATE OF _____

COUNTY OF _____

SUBSCRIBED AND SWORN BEFORE ME THIS

_____ DAY OF _____, 20_____

SEAL

Notary Public

COMMISSION EXPIRES: _____