King of the Road Driving School, LLC Segment II Student Contract

Mailing Address: PO Box 58, Standish, MI Phone: 989-846-0372

Office Address: 425 E. Cedar St., Standish, MI 48658 Office Hours: Monday - Friday 9:00am - 5:00pm Program Number: (Leave Blank-Instructor Will Complete) **State License Number: P000333** This contract is entered into by and between King of the Road Driving School, LLC and Name of Student (as it appears on the birth certificate): Full Name First Middle Last Address___ State____Zip___ Phone Number _____ Age____ Birth Date_____ State of Michigan Segment I Certification Number _____ Example: K 123 456 789 123 Class Location and Starting Date — King of the Road Driving School, LLC shall provide a total of six hours of classroom instruction for a fee of \$ shall be paid prior to the first class. Cash, check or money order will be accepted for payment. King of the Road Driving School, LLC shall supply required materials. All coursework must be completed to pass Segment II. Notice: This school is required to be licensed by the Michigan Department of State, Program Operations Division. If you have a complaint, which you cannot settle with this school, write to: Michigan Department of State, Program Operations Division, Lansing, MI 48918. Completion of driver training instruction does not guarantee qualification for a driver license. For a student to take part in Segment II, verification must be received that the student has completed a minimum of 30 hours of driving (including 2 hours at night) with a licensed parent or guardian (or parent designee) on a Level I license, and there has elapsed a minimum of three months since obtaining a Level I license. **REFUND POLICY/MAKE UP DAYS:** A full refund will occur if the student pays for the class but withdraws before class starts. Once the student has started class, there will be no refund. Students will be allowed to make up one absence from classroom instruction. A fee will be charged for textbooks that are damaged or need to be replaced. Student Signature: Parent/Guardian Signature: Date:_____ Date: King of the Road Signature:

Segment II Contract Form

Please print & sign 2 copies; keep 1 copy for your records & provide 1 copy to King of the Road Driving School, LLC.

The Driving Record of each individual instructor is available upon request