OHIO DEPARTMENT OF PUBLIC SAFETY
EDUCATION · SERVICE · PROTECTION

STUDENT CLASSROOM TRAINING REPORT

The most current version of this document available at www.drivertraining.ohio.gov

SCHOOL NAME			
STUDENT NAME		DATE OF BIRTH	PHONE #
ADDRESS			ZIP CODE
PERMIT #	VALIDATION ISSUED	CLASS START DATE	CLASS END DATE

DATE	START TIME	END TIME	OH UNIT NUMBER	TOTAL TIME	VIDEO TIME HOURS / MINUTES		CLASS LOCATION	STUDENT INITIALS	INSTRUCTOR INITIALS	INSTRUCTOR LICENSE NUMBER

FINAL TEST PERCENTAGE **%**	INSTRUCTOR PRINTED NAME

I, the undersigned Instructor or Training Manager, certify that the student named above has received all classroom training required by Rule 4501-7-10 of the Administrative Code. The student has also received all classroom training required and 4508.02(C) of the Ohio Revised Code. This training included at least 24 hours, and covered units 1 – 10 of the Ohio Driver Training Curriculum. This course must be completed within 180 days from your start date.

SIGNATURE OF INSTRUCTOR OR TRAINING MANAGER
X

10 Ohio Curriculum Units

1. The System and You
2. Vehicle Familiarization
3. Basic Control Tasks
4. Traffic Control Devices and Laws
5. Strategies for Different Environments
6. Natural Laws Affecting Vehicles
7. Handling Emergencies
8. Operating in Adverse Conditions
9. Driver Fitness
10. Owning and Maintaining a Car

No person shall falsify, alter, or in any manner tamper with any records required to be kept by the Ohio Administrative Code.