



**PASSENGER ENDORSEMENT  
STUDENT BEHIND-THE-WHEEL TRAINING REPORT**

The most current version of this document available at [www.drivertraining.ohio.gov](http://www.drivertraining.ohio.gov)

STUDENT'S NAME	DATE OF BIRTH	HOME PHONE #	WORK PHONE #
ADDRESS	CITY	STATE	ZIP CODE
PERMIT # / DRIVER LICENSE #	DATE ISSUED		EXPIRATION DATE
ENTERPRISE NAME	ENTERPRISE #		REPORT YEAR

**NOTE:** Break time and observation time does not count toward the hours of required instructional time.

<b>RANGE TRAINING</b>							Check for Valid Permit	Vehicle Orientation	Pre-Trip Inspection	Enroute Inspection	Post-Trip Inspection	Baggage and Cargo Management	Passenger Safety Briefing	Passenger Management	Railroad Grade Crossings				INSTRUCTOR INITIALS / LICENSE #	STUDENT INITIALS
START DATE																				
PERFORMANCE CODE: 3- GOOD      2- FAIR      1-IMPROVEMENT																				
DATE	START TIME	BREAK TIME	END TIME	HRS DRIVEN	OBSERVATION TIME	TOTAL BTW RUNNING TIME														
																			/	
																			/	
																			/	
																			/	
																			/	
																			/	
																			/	
																			/	
																			/	
																			/	

# ROAD TRAINING

START DATE								PERFORMANCE CODE: 3- GOOD      2- FAIR      1-IMPROVEMENT										CERTIFICATE ISSUED <input type="checkbox"/> YES <input type="checkbox"/> NO	
								Check for Valid Permit	Vehicle Orientation	Pre-Trip Inspection	Enroute Inspection	Post-Trip Inspection	Baggage and Cargo Management	Passenger Safety Briefing	Passenger Management	Railroad Grade Crossings	NUMBER		
																	DATE ISSUED		
																	COURSE COMPLETED <input type="checkbox"/> YES <input type="checkbox"/> NO		
DATE	START TIME	BREAK TIME	END TIME	HRS DRIVEN	OBSERVATION TIME	TOTAL BTW RUNNING TIME										INSTRUCTOR INITIALS / LICENSE #	STUDENT INITIALS		
																/			
																/			
																/			
																/			
																/			
																/			
																/			
																/			
																/			
																/			
																/			
																/			
																/			

I, the undersigned Instructor, certify that the Student has satisfactorily completed the minimum hours of behind-the-wheel instruction required by chapter 4501-7-28 of the Ohio Administrative Code (O.A.C.)	
INSTRUCTOR OR TRAINING MANAGER SIGNATURE	DATE
<b>X</b>	

<b>Optional:</b> I, the undersigned Student, certify that I have completed all training provided by the school as listed above.	
STUDENT SIGNATURE	DATE
<b>X</b>	

No person shall falsify, alter or in any manner tamper with any records required to be kept by the O.A.C.