

PROOF OF ENROLLMENT APPLICATION
(FOR DRIVER ELIGIBILITY)

Student's **Full** Name: _____

Student #: _____ SS #: _____

DOB: _____ School: _____

Address (physical & mailing-if different):

Phone #: _____

**** Form must be complete in order to process the proof of enrollment. Allow up to two weeks for completion. ****

All forms must be returned to the student's home school in order for the proof of enrollment to be generated.

Summer proofs are to be generated at the school as well, please apply two weeks before the end of the current school year. The summer proofs will be valid until the first day of the new school year.