

BHS DRIVER EDUCATION 2014

Brockton Community Schools is proud to offer the Driver Education Program to all Massachusetts Residents at Brockton High School.

Brockton Community School Driver Ed Program urges you to... "Hang It Up Before You Buckle Up!" DON'T TEXT AND DRIVE



Hours of Operation:	Classroom - M,T,W,&F	2:30pm - 4:30pm
ROOM E118	Driving - M,T,W,&F	2:30pm - 6:30pm
Fine Arts Bldg.	Saturday	8:00am - 12:00pm, 1:00pm - 5:00pm
	(Summer Session)	8:00am - 10:00am

See Calendar Online for start dates (www.brocktoncommunityschools.com)

For more information, view our resources website at www.brocktondrive.org

Fee Structure for Driver Education:

Classroom Fee: \$250.00 (See ***Note** for \$50 discount.)

(Student has to be at least 15yrs, 9 months old)

(Payment options are available for classroom fee ***must be paid in full by Mod 7**)

Driving Fee: \$340.00 (Students must be 16yrs old with a valid learner's permit)

Driving Fee: \$440.00 (If attended Driver Ed. classroom at another location or for driving only.)

(Full Payment Due for entire program before student can begin driving)

Each additional hour: \$40.00**

Driving Instructor and Car Rental for License Exam: \$75.00**

Parent Class: No Fee for parents with a student in the program**

All RMV fees extra

****Additional fees may apply if not a Brockton Community Schools Driver Ed. Student**

PAYMENTS CAN BE MADE ONLINE at www.brocktoncommunityschools.com

or at **BCS OFFICE LOCATED AT 43 CRESCENT STREET, BROCKTON, MA**



DRIVER EDUCATION SUPERVISORS

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STOP!!

REGISTER ONLINE WITH
CREDIT/DEBIT CARD

***HONOR ROLL
STUDENTS SEE *NOTE
BELOW BEFORE
REGISTRATION**

VISIT: brocktoncommunityschools.com

SELECT: Driver Education

CHOOSE: Driver Education Classroom or Driver Education on the Road Driving
Community Schools has a no-refund policy. A credit voucher can be issued. The fee will only be refunded if the course is canceled. Brockton Community Schools is not responsible for lost or stolen personal property including any types of electrical devices. Students who carry these items do so at their own risk.

***NOTE:** All students who have achieved **HONOR ROLL** status during the past 12 months are entitled to receive a \$50 discount on a new, Driver Education Classroom Registration. To receive this discount, the student must bring their report card in person to the Community Schools Office at 43 Crescent Street, Brockton, MA.
at the initial registration.

In order to complete the MA State Driver Education Program, each student **must** complete 30 hours of classroom instruction and **must** complete twelve (12) hours of driving and six (6) hours of observation. A Parent/Guardian **must** also complete a two (2) hour workshop for certification. The workshop will be held on one evening per month. A student is also expected to complete 40 hours of supervised instruction with parents/guardians. The Registry of Motor Vehicles charges \$15.00 to process the classroom and driving requirements of the course. This fee, in the form of a money order made payable to MASS DOT/RMV, will only be collected after the student has completed all requirements.

Class will not count if student is tardy more than 15 minutes

Any module missed, the exact same module must be made-up



The Brockton Public Schools does not discriminate on the basis of race, religion, color, national origin, age, sex, veteran's status, sexual orientation, gender identity or disability in admission to, treatment in or employment in its programs and activities. Procedures to ensure statutory provisions are delineated in the Brockton Public Schools Procedures Manual.

2014 DRIVER EDUCATION REGISTRATION/EMERGENCY FORM

(please print)

Student First Name: _____ Student Last Name: _____

Gender: (circle) M F (Male or Female) Age: _____ DOB: _____ (mm/dd/yyyy)

School: _____ Grade: (circle one) 9 10 11 12

Home Address: _____ City: _____ ST: _____ Zip Code: _____

Print Legal Name as it appears or will appear on Learner's Permit: _____

Print Address as it appears on permit: _____

Permit Number: _____ Date of Issue: _____ Date of Expiration _____

Primary Parent/Guardian Name: _____ Relation to Child: _____

Home Phone: _____ Work Phone: _____ Ext. _____

Cell Phone: _____ Email: _____

To receive periodic class updates via the email addresses above, please check box

Emergency Contact Name (Other than Parent): _____

Relation to Child: _____ Phone: _____

Family Physician: _____ Phone: _____

List Health Problems: _____

List Allergies: _____

List Medications: _____

Please indicate if there are any parental restrictions (Please circle) Yes No

If Yes please explain (e.g., current restraining order): _____

Tuition enclosed \$: _____ Cash\$: _____ Credit Card#: _____ MO#: _____

I give permission to the Brockton Community Schools staff to perform emergency first aid or for professional medical attention to treat my minor child in case of an emergency. Further, I do hereby consent to the participation of my minor child in the Brockton Community Schools Programs and do forever RELEASE, ACQUIT, DISCHARGE, and COVENANT to hold harmless the Brockton Public Schools and the City of Brockton from any and all actions, cause of action, and claims on account of or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damage which I may now or hereinafter have as parent of said minor child and also all claims or right of action for damages which said minor child has or hereinafter may acquire either before or after said minor child has reached his/her maturity resulting from his/her participation in the Brockton Community School Programs.

Mandatory—Signature of Parent/Guardian: _____

I give permission to the Brockton Public Schools to publish, copyright, or use all films and photographs in which my son/daughter is included, whether taken by staff, students, or others. I further agree that the school can use these photographs and films for any exhibitions, displays, web pages and publications, without reservation or compensation.

Optional—Signature of Parent/Guardian: _____