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**TRAFFIC SAFETY DIVISION APPLICATION FOR**

 **CORRESPONDENCE DRIVER EDUCATION**

 **SCHOOL (CSDRED)**

Correspondence Driver Education school is available for high school students that are currently enrolled either in homeschool or public school. Student must be 15 years of age by the completion of the course, and be unable to attend a traditional driver education class.

NMDOT Traffic Safety Division (TSD) believes personal instruction is the best benefit for students, but may, in its discretion, grant permission for a student to enroll in a correspondence course only if the student legally meets ***Condition 1*** or ***Condition 2*** stated in the application (18.20.3.8 NMAC).

**Please note:** ALL correspondence school education classes are presented only through the mail. NM does not have online or distance learning for driver’s education.

**INSTRUCTIONS FOR COMPLETING THIS APPLICATION**

* Complete application with all the required *supporting documents* and must have parent or guardian **HAND WRITTEN SIGNATURES**
* Acquire & provide all supporting documents required as explained in the checklist

 Provided

* Please do not leave any blank spaces as this will delay processing the application
* Please note that payment should not be submitted to the school until approval is received

 from TSD/TSC nor does payment guarantee or imply that the student will be approved to

 enroll in a correspondence course.

* **Email documents in PDF format to** **tscdriverprograms@unm.edu** **or mail**

 **documents to:**

**UNM Transportation Safety Center**

**Attn: Driver Service Programs**

**4400 Alameda Blvd. N.E., Suite A**

**Albuquerque, NM 87113**

If you have any questions concerning this application or requirements, please contact our office by telephone at 505-238-8820 or email at TSCdriverprograms@unm.edu.

* Applications must include all required information and will be processed in the order they are

 received. Applications that are incomplete or illegible will not be accepted and will be

 returned

* Please allow fifteen (15) business days for review of an application. If additional

 information is needed TSC will send you an email detailing what is needed. If information is

 not received within ten (10) business days, the application will be denied

* If all required documentation is received and the application is approved, TSC will contact

 you and your school of choice via email with an approval notice

**Request for Driver Education Correspondence School**

|  |  |
| --- | --- |
| **Name of Student** |  |
| **Student Date of Birth** |  |
|  **Students must turn fifteen (15) prior to completing this course** |
| **Physical Address** |  |
| **City** |  | **State** NM | **Zip Code** |
| **Parent/Guardian Name** |  |
| **Parent/Guardian Email address** |  |
| **Parent/Guardian Telephone number** |  |
| **CORRESPONDENCE SCHOOL you wish to use** |  |

**A list of NM licensed CSDRED schools can be found at:** [**transportation.unm.edu/youth**](https://transportation.unm.edu/youth/)

* **CONDITION 1. The student named above is home-schooled in ALL subjects.**

 In order for a student to be approved under this condition you must provide verification that you have

 notified and registered with the **New Mexico Public Education Department (NMPED)** your intent to

 home school this student for the current school year. \*\*Please Note: Online schools are not considered

 homeschooled\*\*

* Completed application
* Verification of registration from <https://homeschool.ped.state.nm.us/>
* I understand that I have the responsibility of providing Behind-the-Wheel training for my

 student (Please refer to the MVD Graduated Licensing Program (GDL). Information can be

 found at <https://www.mvd.newmexico.gov/nm-drivers-licenses-ids>

* My student will have one (1) year from start date to complete the course. No extensions will be

 given unless there is reason of utmost importance then NMDOT/TSD will have the final and sole

 decision on granting an extension.

**By my signature, I certify, under penalty of perjury, that the information given in this application and**

**all attached documents is true to the best of my knowledge and ability. I also acknowledge that I have**

**read, checked and agree to the statements above.**

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**Parent or Guardian’s signature Date**

* **CONDITION 2. Circumstances that make it necessary for the student to enroll in CSDRED**

|  |  |
| --- | --- |
| Name of School student currently attends: |  |
| City where School is located |  |
| Telephone Number of School |  |
| Name of Principal or Counselor |  |
| Type of School  | **Public\*** **[ ]  Private** **[ ]  Charter** **[ ]**  |
| **For the application to be considered complete: Please check and supply supporting documentation listed below.** (Letters must be specific to the applicant. Generic or template letters will not be accepted.) |
| **SCHOOL STATUS:**  * If your school has Driver Education, provide a letter from your school official on their letterhead as to why you are not able to attend. This letter must include if the conflict involves wait list, academic or extracurricular activities and be specific on how it conflicts with when the class is provided by the school or by a private Driver Education school.
* For ‘Wait List’ you will need to qualify by a circumstance exampled below. ‘Wait list’ will NOT apply if there is a Driver Education school within 25 miles of student’s residence.
* If your school does not have Driver Education, provide a letter from your school official on their letterhead stating they do not offer Drivers Education. You will need to provide an additional letter meeting an additional circumstance exampled below.
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| **DISTANCE:** If there is a driver education school within 25 miles of your residence, you will need to fulfill at least one additional circumstance listed below. * **ACADEMIC ACTIVITES:** for school sponsored academic activities submit a letter from your school official on their letterhead as to why you are not able to attend a private Drivers Education school.
* **EXTRACURRICULAR ACTIVITIES:** for school sponsored extracurricular activities **OR** outside school activities submit a letter from the school official or person in charge on their letterhead detailing how this activity conflicts with times offered by a private Drivers Education school.
* **STUDENT EMPLOYMENT:** a letter from the student’s employer detailing how their work hours conflict with times offered by a private Drivers Education school
* **EXTENUATING CIRCUMSTANCES:** from a physician on their letterhead stating the medical issue preventing the student from attending a private Drivers Education school **OR** from the parent’s employer on their letterhead stating how their schedule prevents them taking the student to a private Drivers Education school. (Note: Cost or personal preference is not considered extenuating circumstances).
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| Please acknowledge that you have read each statement below:* I have the responsibility of providing 50 hours of Behind-the-Wheel training for my student.
* My student will have one (1) year from start date to complete the course. No extensions will be given unless there is reason of utmost importance then NMDOT/TSD will have the final and sole decision on granting an extension.
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**By my signature below, I certify, under penalty of perjury, that the information given in this application and all substantiating documents is true to the best of my knowledge and ability.**

**I also acknowledge that I have read, checked and agree to the statements above.**

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**Parent or Guardian’s signature Date**