

APPLICATION FOR DRIVING SAFETY COURSE

****DO NOT TAKE THE COURSE UNTIL THIS APPLICATION HAS BEEN APPROVED****

Printed Name: _____

Printed Address: _____

Date of Birth: _____ Texas Driver's License: _____ Citation Number: _____

Email Address: _____

I hereby waive my right to a jury trial, plead no contest to the charge of _____ and elect to take a driving safety course. I understand that I must:

1. Present to the Court a valid Texas driver's license or permit unless I am active duty military or a military dependant. **A copy of my driver's license is enclosed;** and,
2. Present to the Court proof of current financial responsibility (automobile insurance). I understand that my name must appear on the policy or identification card. **A copy of my proof is enclosed;** and,
3. Pay the court cost of **\$114** for any moving violation not committed in a school zone **OR** pay the court cost of **\$139** for any moving violation that is committed in a school zone. **Payment is enclosed.**

After my application is approved, I must:

4. Return to the Court a certified copy of my driving record from the Department of Public Safety showing that I have not completed an approved program within the 12 months preceding the date of the offense. This must be done within the 90 days from the date that the Court approves this application; **and,**
5. Return to the Court a certificate of driving safety course completion from a Texas Education Agency approved course. This must be done within the 90 days from the date that the Court approves this application.

**The driving record and certificate of completion must be turned in at the same time.
One form will not be accepted without the other.**

AFFIDAVIT

I, _____, state under oath that I am not in the process of taking a driving safety course, nor have I completed a course that is not yet reflected on my driver's record as maintained by the Texas Department of Public Safety.

Defendant's Signature

Sworn and Subscribed before me, the undersigned authority on this the ____ day of _____, 20 ____.

Notary Public

My commission expires: _____