Louisiana Department of Public Safety and Corrections

OFFICE OF MOTOR VEHICLES

Class "D" and "E" Driver's License Road Skills Test

APPLICATION FOR ROAD SKILLS TEST

(For Third Party Tester use only)

THIRD PARTY TESTER NAME:	SCHOOL NUMBER:	DATE:
South Louisiana Driving Academy	1223	

PLEASE ENTER THE FOLLOWING INFORMATION AS IT APPEARS ON THE ACCEPTABLE ID.

NAME (LAST, FIRST, MIDDLE/MAIDEN, SUFFIX)		
ADDRESS (STREET/PO POX, CITY, STATE, ZIP)		
DATE OF BIRTH (MTH/DAY/YR)	PERMIT/DRIVER'S LICENSE NUMBER	LICENSE STATE

PARENTAL CONSENT - TO BE USED ONLY IF APPLICANT IS A MINOR

(Check Appropriate Box)

I certify that I am the: ☐ Legal Custodial Father ☐ Legal Custodial Mother ☐ Legal Guardian of the minor applying and this is my authorization to the above Third Party Tester to administer a road skills test.

I hereby declare with proof by documents presented that he/she was born on the_____ day of_____, 20_____. I also declare by signature below, that information furnished by my minor and me is complete and correct.

Signature of person authorized to sign in accordance with R.S. 32:407

NOTE: Only the domiciliary parent can sign if joint custody has been awarded.

_____ _____

Parent's Signature Parent's Printed Name

_____ _____

License/ID No. of Parent/Guardian Examiner's Signature

Documents Verified:

☐Permit

☐TIP

☐Certificate

_____

Applicant's Signature Applicant's Printed Name Date

_____

Examiner's Signature Examiner's ID # Date

DPSMV2271

Louisiana Department of Public Safety
Office of Motor Vehicles
Class "D" and "E" Driver's License Road Skills Test (DPSMV2271)
Disclosure of Terms for Applicants

By my signature below, I affirm that the following statements are true:

- I understand that successfully completing and passing the road skills test through a Third Party Tester does not guarantee issuance of a driver's license by the Office of Motor Vehicles.
- I understand that, at any time, I can be retested by the Office of Motor Vehicles.
- I understand that only the examiner and I shall be allowed in the vehicle when a road skills test is being administered, except if I require an interpreter or the test is being supervised.
- I understand that a *Road Skills Test Certificate* shall be issued to me upon successfully passing the road skills test approved by the Office of Motor Vehicles.
- I understand the fee for a road skills test shall not exceed forty dollars ($40.00). This fee shall cover the cost of the original and one copy of the *Road Skills Test Certificate*. The original certificate, with the original signatures must be submitted to the Office of Motor Vehicles when I make application for a driver's license.
- I understand the Third Party Tester's grievance procedures that have been disclosed to me. The tester shall make every effort to resolve complaints. Any grievance(s) not resolved by the tester may be forwarded to the Office of Motor Vehicles, Attention: Training and Certification Unit, P.O. Box 6486, Baton Rouge, LA 70896-4886.
- I understand the Third Party Tester's cancellation and refund policy.
- I understand the standards of required behavior, including an absolute prohibition against cheating, and the consequences if these standards are violated.
- I understand the Third Party Tester may administer the road skills test during inclement weather.

_____	_____	_____
Applicant's Signature	Applicant's Printed Name	Date
_____	_____	_____
Parent's Signature (if applicable)	Parent's Printed Name	Date