



DRIVER EDUCATION SUPPLY REQUEST FORM

INSTRUCTIONS: Complete appropriate sections. Please print in ink or type. Retain a copy for your files.
Send the original copy to:

Occupational Licensing Section
PO Box 932342 MS L224
Sacramento CA 94232 3420

SCHOOL NAME	SCHOOL ID NUMBER
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SECTION 1 — FORMS ON HAND AND AMOUNT REQUESTED

**For Driver Education and Behind the Wheel Training Use Only*

AMOUNT ON HAND	ADDITIONAL REQUESTED	FORM NO.	DESCRIPTION
EACH	EACH	DL 387	Certificate of Completion of Driver Education (Public Secondary School) – 1 per student
EACH	EACH	DL 387 A	Certificate of Completion of Non Classroom Driver Education (Public Secondary School) – 1 per student
EACH	EACH	DL 387 B	Certificate of Completion of Classroom Driver Education (Private Secondary School) – 1 per student
EACH	EACH	DL 387 C	Certificate of Completion of Non Classroom Driver Education (Private Secondary School) –1 per student
EACH	EACH	DL 387 D	Certificate of Completion of Classroom Driver Education (Home School/Private School Satellite Program) – 1 per student
EACH	EACH	DL 387 E	Certificate of Completion of Non Classroom Driver Education (Home School/Private School Satellite Program) – 1 per student
EACH	EACH	DL 388 A	Certificate of Completion of Behind the Wheel Training (Public Secondary School) – 1 per student
EACH	EACH	DL 388 B	Certificate of Completion of Behind the Wheel Training (Private Secondary School) – 1 per student
EACH	EACH	DL 388 C	Certificate of Completion of Behind the Wheel Training (Home School/Private School Satellite Program) – 1 per student

The signatory must be the owner, officer, administrator or principal of the school. An instructor, secretary or representative is not an authorized signatory.

SECTION 2 — CERTIFICATION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE	DATE SIGNED
X	
PRINT NAME	TITLE