

Please Imprint Your Driving School Letter Head Here  
(Including Address and Telephone Number)

**CERTIFICATE OF PARENTAL CURRICULUM COMPLETION**

This is to certify that the individual identified herein has completed a two-hour course of instruction as the parent or guardian, or designee of either, for the student identified below.

The *Parent Curriculum* is required to be completed under the provisions of Massachusetts General Law Chapter 90, Section 8 (c) and 540 C.M.R. 23.06 (1)(c)3 in a program of Driver Education instruction as prescribed by the Massachusetts Registrar of Motor Vehicles.

The name of the student is: \_\_\_\_\_ Permit No. \_\_\_\_\_

The name and address of the parent, guardian, or designee completing the two-hour program is:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

and such person shall be exempt, by provision of said Section 8(c), from being required to attend additional Parental Curriculum instruction within five (5) years from the date of completion.

The date of completion of the two-hour program is: \_\_\_\_\_

Name of School: \_\_\_\_\_ School Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Proprietor, Director or Officer)

*False statements are punishable by fine, imprisonment, or both (Chapter 90, Section 24)*