



Be seen. Be heard.

Driver License Online Course Registration Form

This course is approved for instruction in North Dakota pursuant of North Dakota Century Code 39-06-01.1 and North Dakota Administrative Code Article 38-07.

You have four (4) months from the registration date to complete this activity. All tests must be passed with an 80% pass rate. You will be given multiple opportunities to take the tests. The student will receive a completion certificate from MSU after the course is completed. The Department of Transportation, Drivers Licensing Division, requests a driver test not be scheduled until the student receives their certificate.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

E-mail Address: \_\_\_\_\_
(Instructions for logging into the online course, along with a login and password, will be sent to this e-mail address. Please ensure it is valid.)

Birth Date: \_\_\_/\_\_\_/\_\_\_ Social Security Number: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Present Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian to Complete:

I certify that \_\_\_\_\_ (name of student) is a minor whose driver's license has been cancelled by the North Dakota Department of Transportation.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Please print this form and mail it with your non-refundable \$100.00 fee (check or money order) to: Center for Extended Learning ~ Minot State University ~ 500 University Ave W ~ Minot, ND 58707.

If you wish to pay enrollment fee by VISA, MasterCard, or Discover, please complete:

ACCT #: \_\_\_\_\_ Exp. \_\_\_/\_\_\_ V Code: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

CEL Office Use Only

Contract # \_\_\_\_\_ Date of Completion/Drop: \_\_\_\_\_ Instructor: Dr. James Copeland