

**COMMONWEALTH OF KENTUCKY
DRIVER LICENSING SCHOOL ENROLLMENT
VERIFICATION
KRS 159.051 (NO PASS/NO DRIVE STATUTE)**

This form verifies that this student is in compliance with KRS 159.051, the No Pass/No Drive Statute. Submit this form to the Circuit Clerk's Office with the following documents: an original or certified copy of your birth certificate and your signed social security card. Additionally, a parent or legal guardian must be present to give his/her consent.

STUDENT INFORMATION

Name: _____ Date of Birth: _____
Last First Middle Month/Date/Year

Social Security Number: _____

SCHOOL INFORMATION

Public Private Home

District: _____ Full Name of School: _____

School Telephone Number: () _____ School Address: _____
PO Box

_____ *Street City State Zip Code*

SCHOOL CERTIFICATION

I hereby certify that this student is in compliance with KRS 159.051.

Designee of Superintendent: _____ Title: _____
Signature

School District: _____ Telephone Number: () _____ Date: _____
(This verification form is invalid sixty (60) days from this date.)

or Private School: _____
Signature of Principal

or Home School: _____
Signature of Parent/Guardian (A parental statement for students in home schools may be used in place of this form, KRS 186.440.)

AFFIXED SEAL