



129 S. Main St., Marysville  
(937)644-8631

Dear Parents,

Thank you for choosing Stewardship Driving School. We strive to live up to the trust you have placed in us. This is an exciting time in the life of our students, and maybe a little too exciting for parents, but we want it to be an enjoyable experience, yet taken seriously. A lack of communication can make it frustrating for both you and us. We hope this letter can improve that communication.

As you know the process starts by obtaining a booklet of the Ohio motor vehicle Laws. After this is studied then they must take the test at the exam station next to the BMV. The permit can then be purchased at the BMV. This must be held for six months before the license test can be taken. In that six months, the 50 hours with a parent and 8 hours with the driving school can be done. They must carry the permit whenever they drive with you or us. The permit is good for one full year.

There are eight classes; they are on Tuesday and Thursday in Marysville. All classes are 6:00 PM to 9:15 PM each night. They must arrive on time and will not be released before the time is up. The classes can be taken in any order but, the 8th class must be taken last. If they miss a class, it must be made up before taking a class 8. In the event we must cancel a class because of bad weather it will typically be scheduled for the next week on an off night. Cancellations and any make up classes can be found on our web site at [www.stewardshipdriving.com](http://www.stewardshipdriving.com).

You or the student must call the office to schedule the drives. Office hours are Monday through Friday from 12:00 PM to 5:00 PM. You may schedule drives after payment has been made in full and all classroom hours have been completed, including a passing score on the final test. Students will be picked up in our designated pick up area. Please make sure the student has a valid permit with them. *If the student can not drive on a scheduled time, call as soon as possible to allow us time to schedule some one else at that time and to reschedule in a timely manner. The agreement allows us to charge extra for a late cancellation.*

We understand emergencies happen, and you may need to contact us on short notice. Our office is closed Saturday and Sunday, and messages left on our voicemail will not be received until the next business day. Should you have an emergency arise during the weekend and need to cancel a drive, please contact us at (740) 500-0068. Our office will contact you during regular business hours to re-schedule.

After the course has been completed, both class and driving, we will mail the certificate or you may stop by the office and pick it up. Please let us know before final drive. Because the certificate is now time and date stamped, we can no longer make them up before hand to give them on the last drive or class. **Please do not schedule their driving test before receiving the certificate.** When you receive the certificate please keep it in a safe place until they take the test. In the event of a lost or destroyed certificate, we must issue a duplicate certificate. You will need to come in and fill out a request for a duplicate form and pay an extra fee of \$10.00.

When they go to take the test they will need to take their permit, certificate from the driving school and the 50 hour affidavit. The 50 hour affidavit must be signed in the presence of and notarized by a notary.

A set of cones can be made available to use for practicing maneuverability for a nominal charge of \$10.00 and a refundable \$50.00 deposit. Cones are to be returned in 5 days or subject to additional \$5.00 per day charge.

If at anytime you have any concerns or questions, please call the office during business hours at 937-644-8631.  
[www.stewardshipdriving.com](http://www.stewardshipdriving.com)



**TRAINING AGREEMENT**



ENTERPRISE NAME Stewardship Driving School LLC		LICENSE NUMBER 1374	
CLASSROOM ADDRESS 129 S. Main St.	CITY Marysville	STATE OH	ZIP CODE 43040-

Stewardship Driving School, hereinafter referred to as "The Driving School" agrees to provide applicant, hereinafter referred to as "Student", 24 hours of classroom instruction and 8 hours of practical driving instruction based on the Ohio Driver Training Curriculum. State of Ohio regulations require The Driving School to make available all training by \_\_\_\_\_. Should a student be unable to attend the available training sessions offered, the school is relieved of the aforementioned obligation. Regulations prohibit more than four hours of training to be conducted in one day. The Driving School shall furnish a licensed instructor and a motor vehicle for instruction. The tuition for said instruction is \$ 500.00.

Any additional classroom training that the student chooses to procure shall be furnished at the rate of \$ 30.00 per hour. Additional in-car training may be obtained at the hourly rate of \$ 55.00. Students, upon the approval of The Driving School, may, for an additional fee of \$ N/A use the Driving School's vehicle to take a driving exam at a State exam center located in N/A County, OH. [ We do not offer this at this time]

The Driving School may loan the student a textbook for use during enrollment at the Driving School. A fee of \$ NA will be charged for any book not returned or returned damaged.

The student may begin classroom instruction at age 15 years and 5 months, before obtaining a temporary driving permit. However, the Student is required to obtain a valid temporary driving permit, pay tuition in full and complete all classroom hours with a passing final test score prior to scheduling the practical driving portion of the training. If the Student must cancel a scheduled driving appointment, cancellation must be made before a minimum of 24 hours prior to the scheduled appointment. Failure to do so may result in an additional fee of \$ 50.00. The same fee shall apply should the student fail to appear for, or for any reason not be prepared to take the scheduled lesson. The Driving School reserves the right to deny the student admittance to any class if the student is tardy. Should a check received as payment of tuition in whole or in part, be returned due to insufficient funds, the student may be removed from driving schedule until such check is made good. An additional fee may be charged for any returned check.

The Student is required to complete all available training within six months of the date the training begins. There may be no refunds provided after that time. Upon expiration of this agreement, a reinstatement fee may be charged before any further services are provided. The Driving School does not guarantee the issuance of a driver's license to the student. If training is not completed within the six months, a new agreement shall be established, and training shall be restarted.

The Driving School reserves the right to cancel this agreement at any time, should the student's conduct indicate a lack of responsibility deemed necessary by The Driving School to safely operate a motor vehicle. Destruction of property, or the possession, distribution, or use of any tobacco product, alcohol, or drug of abuse is strictly prohibited. Should this agreement be canceled under such circumstances, all fees may be pro-rated, based upon hours of services provided prior to cancellation.

Refund Policy: None

The Driving School shall furnish a certificate of completion to all students under the age of eighteen years, who successfully complete the course. Completion, as defined by the State of Ohio, refers to the completion of the required number of hours, the student's good faith effort having been exercised during the practical driving portion, and the attainment of a score equal to or greater than 75% on the performance measurement. Should Student fail to achieve the minimum passing score on the final exam additional classroom attendance may be required.

Commercial Driving schools are licensed by the Department of Public Safety through the Driver Training Program Office, 1970 West Broad Street, Columbus, Ohio 43223. Valuable information for parents and teenagers is available on the internet at [www.drivertraining.ohio.gov](http://www.drivertraining.ohio.gov); under Parents and Teens.

I have read and understand and have received a copy of this agreement.

SCHOOL OFFICIAL Michael Petry		SIGNATURE OF SCHOOL OFFICIAL <b>X</b> <i>Michael Petry</i>	DATE
STUDENT	STUDENT DOB	STUDENT SIGNATURE <b>X</b>	DATE
PARENT / GUARDIAN		PARENT / GUARDIAN SIGNATURE <b>X</b>	DATE

School officials must be the authorizing official, training manager, or instructor. The Driving School may add addendum(s).



Acc: \_\_\_\_\_

## Stewardship Driving School

Off: \_\_\_\_\_

"In all your ways acknowledge Him, and He shall direct your paths." Proverbs 3:6

### Informational Sheet

Students Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
(First) (Middle Initial) (Last)

Street Address \_\_\_\_\_ City \_\_\_\_\_

County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent's # (\_\_\_\_) \_\_\_\_\_ Students # (\_\_\_\_) \_\_\_\_\_

E-Mail (optional) \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Approximate Hours Driven \_\_\_\_\_ High School \_\_\_\_\_

Permit Number \_\_\_\_\_ Issue Date \_\_\_\_\_



129 S. Main St. Marysville, Ohio 43040

937-644-8631

## MEDICAL RELEASE FORM

This form is required before students may participate in the In-Car portion of Driver's Education

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Emergency Contact Number: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Dr's Name: \_\_\_\_\_ Dr's Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Hospital Preference: \_\_\_\_\_

My child has the following medical conditions that may affect him/her in the car:

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In the event neither parent or Doctor listed cannot be contacted, I hereby authorize Stewardship Driving School or it's designee to obtain emergency care for my child when, in the opinion of a physician and/or surgeon licensed under the provisions of the Medical Practice Act, such medical care will be in the best interest of the child and should not be delayed pending consent of the parents or family Doctor. I understand that Stewardship Driving School has liability insurance which covers costs that might occur if my child is involved in a crash while in schools cars. Consequently, I understand that all additional costs shall be my sole responsibility.

Parent/Guardian Signature: \_\_\_\_\_