STATE OF FLORIDA

CERTIFICATION OF DRIVING EXPERIENCE OF A MINOR

I do hereby certify that				, a minor,
	First	Middle	Last	, ,,
date of birth	, has dri	, has driven a minimum of 50 hours during the past 12 months, of		
which 10 hours of driving	were at night per Section	322.05(3), Florida S	tatutes.	
Under penalties of perjury it are true.	y, I declare that I have r	ead the foregoing d	ocument and that t	ie facts stated in
Signature of Parent or Leg	al Guardian	Print	Name	
Parent or Legal Guardian	Driver License Number	Date	signed	
INSTRUCTIONS: 1. Parent signing above mu 2. Parent signing above mu				hand on test date
Note: If signing as legal g	uardian, please provide	e guardianship pape	ers when turning in	form
DL Examiner Signature				
Exam Date				