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**Parent Consent Form for Learning License**

**Parental Consent Form for Learning License**

**Applicant's Information:**

* **Full Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Date of Birth:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (MM/DD/YYYY)
* **Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Contact Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**License Details:**

* **Type of License Applied For:** Learner's Permit for Automobile / Motorcycle / Other
* **Application Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Information:**

* **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Relationship to Applicant:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Address (if different from applicant):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Contact Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Consent Statement:** I, [Parent/Guardian Name], am the legal guardian/parent of [Applicant's Name], who is under the age of 18. I hereby give my consent for my child to apply for a learner's permit. I certify that my child meets the age requirements set by law to begin learning to drive, and I acknowledge that I have read and understood the responsibilities and restrictions associated with a learning permit.

I understand that as a parent/guardian, I am required to ensure my child receives the necessary supervised driving practice and adheres to the laws and restrictions applicable to a learner’s permit holder.

**Liability and Medical Consent:** In the event of an emergency arising during driving lessons or tests, I authorize the [DMV or relevant authority] and emergency service personnel to take necessary actions and provide medical treatment to my child.

**Signature of Parent/Guardian:**

* **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant's Acknowledgment:** I, [Applicant's Name], acknowledge that I have discussed the learning license application with my parent/guardian and understand my responsibilities as a learner driver.

* **Signature of Applicant:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_