## Parent Consent Form for Learning License

## **Parental Consent Form for Learning License**

Appl	icant's Information:	
•	Full Name:	
•	Date of Birth:	
•	Address:	
	Contact Number:	
_icer	nse Details:	
•	Type of License Applied For: Learner's P	Permit for Automobile / Motorcycle /
	Other	
•	Application Date:	
Pare	nt/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.

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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:		