Jordan Driving School, Inc.

101 Timber Pointe Lane
Garner, NC 27529
Tel: 919-772-4877
Fax: 919-662-2628

Lorraine Jordan, President
Janice Jordan, Vice President
Royce C. Jordan, Corporate Secretary

"A Quality Program"

Date: _____

Name of Student:_____ _____
First Middle Last date of birth

As a parent or legal guardian of the above referenced student, I request that Jordan Driving School release all necessary information regarding my child as it pertains to Driver Education. I acknowledge this process can take 10 business days to release the information to the private or public school listed below. Jordan Driving School has permission to release this information to:

Private Driving School: _____
Attention: _____
Address: _____
_____

Or

Public School Driver Education: _____
Attention: _____
Address: _____
_____

School student took the classroom portion at: _____
Month/Year student took the classroom portion:_____/_____
School student attends or attended in Wake County: _____
Parent Contact Name: _____and #: (____)_____-_____

_____
Print Name of Parent or Guardian

_____
Signature of Parent or Guardian

Approved by:

_____
WCPSS Driver Education
Senior Administrator