

ADULT REMEDIAL DRIVER IMPROVEMENT PROGRAM INFORMATION

Greater Hamilton Safety Council

400 North Erie Boulevard

Hamilton, Ohio 45011

Phone: 513-896-5333

Fax: 513-896-5334

Email: gtrhamsc@hamiltonsafety.com



_____ M _____ F _____
(Last Name) (First Name) (Middle Initial)

Address _____ City _____ State _____ Zip _____

Phone Number _____ Driver License Number _____

Birth Date _____ Social Security Number _____

PLEASE CHECK BOX THAT APPLIES TO YOU.

- I HEARBY APPLY TO THE Registrar of Motor Vehicles to credit two points on my driving record in accordance with Section 4510.037(c). I am aware that I am not entitled to a two point credit, if on this date the total point assessed against my record is less than 2 points or more than 11 points.
- This course has been completed as a requirement for being eligible to retain or have my driver license returned due to a twelve (12) point suspension. Section 4510.038(A).
- This course has been completed as a requirement for being eligible to retain or have my driver license returned due to being under the age of 21 and operating a vehicle with a prohibited level of alcohol in the blood, breath and urine as provided in R. C. 4511.19 (B) or a substantially similar municipal ordinance.
- Court ordered not for credit (this student was court ordered to take the Remedial Course and will not receive the 2 point credit.) Forward certificate to Court.
- This person is 19 years old or older but is taking the class because of a juvenile suspension that occurred before the age of 18.

Signature of Course Participant _____

CHECK PHOTO ID



**ADULT REMEDIAL COURSE
TRAINING AGREEMENT**

ENTERPRISE NAME GREATER HAMILTON SAFETY COUNCIL	
ENTERPRISE ADDRESS 400 N ERIE BLVD HAMILTON, OHIO 45011	
NAME OF CURRICULUM USED REMEDIAL DRIVER PLUS	DPS APPROVAL #

TRAINING

NAME OF SCHOOL GREATER HAMILTON SAFETY COUNCIL agrees to provide 8 hours of Adult Remedial instruction that meets all Ohio requirements including Ohio Revised Code 4510.037.
The fee for said instruction is \$105.00
Replacement Certificates of Completion will be provided at an additional cost of \$20.00

PRIVACY POLICY

NAME OF SCHOOL GREATER HAMILTON SAFETY COUNCIL will not share any personal or financial information regarding any person participating in this course. Unless such information is required by a governmental agency to complete the requirements of this course.

FINAL EXAMINATION

A student must correctly answer seventy-five percent (75%) of the final examination questions. If a student does not correctly answer seventy-five percent of the final examination questions, the student shall have the opportunity to retake the final examination one additional time. If the student fails to score at least seventy-five per cent after taking the examination the second time, the student shall be required to retake the course.

INAPPROPRIATE BEHAVIOR AND PARTICIPATION

<i>Dismissal Policy:</i> If a student is deemed to be using inappropriate behavior or not participating in the course, they will be dismissed. <i>Refund Policy:</i> The course fee will not be refunded and the student will not be readmitted to a course at this school.

CERTIFICATE OF COMPLETION

A certificate of completion will be issued to all students that successfully complete all course requirements. The requirements are: actively participating in and attending all eight hours of instruction and attainment of a score equal to or greater than 75% on the final examination.

GRIEVANCE PROCEDURE

If a student has a grievance, the complaint must be brought to the attention of the instructor in a respectful manner. The student and instructor will then attempt to settle the complaint. If the complaint is still not resolved, the owner, instructor and student will attempt to settle the complaint. Should both parties not be able to reach an agreement that is acceptable to both parties, the matter can be referred to the Department of Public Safety through the Driver Training Program Office, 1970 West Broad Street, Columbus, Ohio 43223.

SCHOOL OFFICIAL NAME (print or type)	SIGNATURE OF SCHOOL OFFICIAL X	DATE
STUDENT NAME (print or type)	SIGNATURE OF STUDENT X	DATE