



STATE OF OKLAHOMA )  
 ) §  
 \_\_\_\_\_ COUNTY)  
(county of notarization)

**AFFIDAVIT OF DRIVER TRAINING**

I, the undersigned, declare upon oath and under penalty of perjury that I am the Parent/Legal Guardian of the person named below and I further declare that the person listed below has received a minimum of forty (40) hours of actual behind-the-wheel training, of which at least ten (10) hours of such training was at night, from a licensed driver who was at least twenty-one (21) years of age and who was properly licensed to operate a Class D motor vehicle for a minimum of two (2) years. [§47 6-105, D, 1, (c)]

**\* THIS DOCUMENT MUST BE COMPLETED IN THE PRESENCE OF A NOTARY PUBLIC \***

**APPLICANT INFORMATION:** (please print clearly)

Driver License Number: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Last First Middle

**PARENT INFORMATION:** (please print clearly)

Driver License Number: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Last First Middle

\_\_\_\_\_  
Signature of Parent/ Legal Guardian

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

If Notary Has Ink Stamp, Please Stamp in this Area

\_\_\_\_\_  
Notary Public Signature

My Commission Expires: \_\_\_\_\_