



Yoshi's Driving School 389-5989

[illegible]



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Date	Practice Route & Skill (residential,highway,parking)	Time of Day	Weather	Lenght of session	Adult's Initials

Total Hours Day _____ **Night** _____

**STATE OF HAWAII
Department of Transportation**

ACKNOWLEDGMENT OF PRACTICE DRIVING

STATE OF HAWAII, _____ } SS.
COUNTY OF _____ }

I, _____, do solemnly swear or affirm under penalty of perjury that I am a parent or legal guardian of _____ (minor), and that based on my personal or otherwise reasonably obtained knowledge, said minor has completed forty hours of day-time driving, and ten hours of night-time driving, supervised by a licensed driver over the age of eighteen.

Subscribed and sworn to before me this _____
day of _____, 20_____

Signature of Parent/Guardian

My commission expires: