



REQUEST FOR A PARENT TAUGHT DRIVER EDUCATION (PTDE) PACKET

PROGRAM ELIGIBILITY REQUIREMENTS

- A. The student must be 14 years of age prior to beginning the classroom portion; however they may not test for a learner license until their 15th birthday.
- B. No instruction is permitted prior to receipt of the Parent Taught Driver Education Packet. Any instruction prior to that time will not be accepted toward the required instruction time.
- C. A minimum of 76 hours of actual instruction time is required to instruct this course and it is estimated that an equal number of hours for preparation are required for an instructor to properly teach this course.
 - The classroom thirty-two hours must not be completed in fewer than sixteen calendar days.
 - The behind the wheel forty-four hours must not be completed in fewer than forty-four calendar days.
 - A student shall not be instructed more than two hours in one (1) day.
- D. This course may or may not qualify for a discount for automobile insurance purposes due to Department of Insurance rules. You should consult with your insurance carrier concerning this matter.
- E. No behind the wheel instruction or practice may be permitted until the student has been issued a learner license. Driving without a valid license on a public street or highway is violation of state law. Any behind the wheel instruction prior to issuance of the learner license will not be accepted toward the required instruction or practice time.
- F. Instructor must be the student's parent, step-parent, grandparent, foster parent or legal guardian appointed by a court of competent jurisdiction. A power of attorney is not legally sufficient.
- G. The instructor must have a valid driver license for the preceding three years; or if active military personnel or spouse, a valid driver license from state of permanent residency or last duty station for the preceding three years.
- H. The instructor cannot have a conviction (including a probated sentence) of criminally negligent homicide or driving while intoxicated. The instructor must not have had their driving privileges suspended, revoked or forfeited for traffic related violations in the past three years. The instructor cannot have six or more points assigned to their driver license. The instructor is responsible for checking both their criminal or driver records prior to requesting the packet. DPS will verify the instructor's record at the time of processing the student's learner license and again at the time of processing the student's provisional driver license. If at that time, DPS determines that the instructor does not meet the requirements, we will deny the learner license or provisional driver license along with any prior classroom instruction or behind the wheel/in the car instruction provided by the ineligible instructor.
- I. The Instructor may not be disabled due to mental illness. Questions as to mental stability will be forwarded to the Medical Advisory Board for determination.
- J. The instructor may go to any local driver license office to have the student apply for the license and take the required test. (Some stations require an appointment or may allow online scheduling for the skills test.)
- K. **DO NOT MAIL CASH.** Mail check or money order payable to: Texas Department of Licensing and Regulation. A separate request form and non-refundable fee are required for each student who will participate in the PTDE program.

NOTE: ALL INFORMATION AND REQUIRED FEES MUST BE SUBMITTED BEFORE A PARENT TAUGHT DRIVER EDUCATION PACKET WILL BE MAILED. PLEASE ALLOW 2-3 WEEKS FOR DELIVERY.

1. INSTRUCTOR'S NAME - Print/Type your legal name in the spaces provided. (Last, First, Middle Name, Suffix)
Examples of a suffix include Jr., Sr., and III. (Mr. is not a suffix.)
2. INSTRUCTOR'S MAILING ADDRESS - Print/Type your current mailing address. This is the address where we will send you mail. This address can be a post office box. You can add the zip plus-4 to help the postal service deliver mail more efficiently and accurately.
3. INSTRUCTOR'S PHONE NUMBER - Print/Type a telephone number, including the area code, where we can reach you during the day. This may be your office phone number where we can leave a message.
4. INSTRUCTOR'S EMAIL ADDRESS - Print/Type your email address. Please provide your email address so the department may email license information and required notices to you. Your email address is confidential pursuant to the Texas Public Information Act, and the department will not share it with the public. Check the box if you would like to have the packet emailed.
5. STUDENT'S NAME - Print/Type your legal name in the spaces provided. (Last, First, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and III. (Mr. is not a suffix.)
6. STUDENT'S DATE OF BIRTH - Write your birthdate.
7. STUDENT'S EMAIL ADDRESS - Print/Type your email address. Please provide your email address so the department may email license information and required notices to you. Your email address is confidential pursuant to the Texas Public Information Act, and the department will not share it with the public.
8. INSTRUCTOR'S SIGNATURE



TEXAS DEPARTMENT OF LICENSING AND REGULATION
 PO Box 12157 • Austin, Texas 78711-2157
 (800) 803-9202 • (512) 463-6599 • FAX (512) 475-2871
 www.tdlr.texas.gov • cs.driver.education.safety@tdlr.texas.gov

**REQUEST FOR A PARENT TAUGHT DRIVER
 EDUCATION (PTDE) PACKET**

DO NOT WRITE ABOVE THIS LINE

**MAIL THE REQUEST FORM AND \$20.00 FEE TO TDLR
 (FEE IS NON-REFUNDABLE)
 PAYMENTS MUST BE IN THE FORM OF A CASHIER'S CHECK OR MONEY ORDER PAYABLE TO TDLR**

ALL INFORMATION MUST BE TYPED OR PRINTED IN BLACK INK

Instructor's Information (Parent or Legal Guardian). Parent Taught Driver Education Packet will be mailed to the address below.

1. Instructor's Name:

_____ Last _____ First _____ Middle Name _____ Suffix (JR, SR, III)

2. Instructor's Mailing Address:

Number, Street Name, Apartment Number

City State Zip Code

3. Instructor's Phone Number:

(_____) _____
 Area Code Phone Number

4. Instructor's Email Address:

Check to have packet emailed

(Ex: johndoe@aol.com) See instruction sheet for disclosure information

Student's Information

5. Student's Name:

_____ Last _____ First _____ Middle Name _____ Suffix (JR, SR, III)

6. Student's Date of Birth:

____ - ____ - ____
 Month Day Year

7. Student's Email Address:

(Ex: johndoe@aol.com) See instruction sheet for disclosure information

**ALL INFORMATION AND REQUIRED FEE MUST BE SUBMITTED BEFORE A PARENT TAUGHT
 DRIVER EDUCATION PACKET WILL BE MAILED. PLEASE ALLOW 2-3 WEEKS FOR DELIVERY.**

8. Instructor's Signature:

_____ Instructor Signature _____ Date