

TEDRS USER'S GUIDE



OPI'S TRAFFIC EDUCATION DATA & REPORTING SYSTEM

How to fill out and submit your Traffic Education Student List and Program forms in TEDRS.



WELCOME TO TEDRS!

Use TEDRS to submit these forms and reports online:

- TE01 Annual District Application Due August 1 for fall programs or before TE program begins.
- TE03 Certification & TE04 Student Lists Enter and submit online. Submit to driver exam station with driver license applications within three days after knowledge exam. Then submit completed forms to driver exam station when course completes. Include road test score sheets, if applicable.
- TE06 Year-End Report Due before July 10 for reimbursement to district in August.

				-		
Home Pre	Educator Licensure	Reports & Data Te	aching & Assessment	Resources	Finance & Grants	Er
Home » Programs » DriverEd » Traffic Education						
80						
	Traffic Ed	ucation		<i>(</i>		
Welcome to					-	
Approved High School	Information and resou	irces for educators,				
	teen driver safety.	driver education and				
Montana Teen Driver	Traffic Education Data	a & Reporting System	N SYIEL	STOP		
	(TEDRS)		ONE WAY			
Adapted Illustrated	TEDRS LOGIN		OMEANYA	1210b		
Driver Manual						
Traffic Educators						
Forms & Reports	Parents/Teens Dist	ractions Seat Belts	Share the Road	Montana		
Montana DRIVE						
Advanced Driver	Driving Tips			20-21-4		
- Maraneca Briter		turos Vidoos, Graphics ar	id more 🖗		ALV TO	
Education	Car Safety Feat	tures videos, Graphics ar		2.0		
Forms & Reports Montana DRIVE	Driving Tips	turas Videos, Granhies ar	nd more 🖗		A CO	
Education	Car Safety Feat Teens and True	sks- Sharing the Road জ		ND	ALK TU	

Check TE Program Approval Online

Home » Programs » DriverEd » Traffic Education

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Approved High School Programs

Montana Teen Driver Curriculum

Adapted Illustrated Driver Manual

Traffic Educators

Forms & Reports

Montana DRIVE

Advanced Driver Education

Crossing Guards

4 OPI Montana Traffic Education Programs



opi.mt.gov

This webpage allows searching for approved traffic education programs in Montana. Search by District below to view traffic education programs approved by the Office of Public Instruction. Program dates and traffic education instructors for the current and previous school years are shown.

To register a teen driver for a driver education course, contact your local School District or high school. Select a District:

Great Falls H S

^o rograms:						Instructors:		
Semester	Start Date	Completion Date	Approved	CDTP		Name	CDTP	TE Certificate Expiration
Summer	7/6/2017	8/25/2017	Yes	Yes	Instructors	Brien, Aaron R	Yes	2019
Summer	5/17/2017	6/20/2017	Vac	Vaa	Instructors	CLANIN, CLAYTON DOUGLAS	Yes	2017
Summer	5/1//2017	0/30/2017	Tes	Tes	instructors	DAVIS, MICK J	Yes	2021
Second	3/20/2017	5/25/2017	Yes	Yes	Instructors	DIETZ, F. MICHAEL	Yes	2019
Second	1/23/2017	4/2/2017	Yes	Yes	Instructors	Dougherty, Pamela E	Yes	2021
Eirot	0/10/2016	12/21/2016	Vaa	Vaa	Instructors	Hering, Jr, Anthony K	Yes	2020
FIISL	9/19/2010	12/21/2016	res	res	instructors	Metge, Murray W	Yes	2021
First	8/31/2016	1/20/2017	Yes	Yes	Instructors	Olson, Gerald A	Yes	2018
Summer	7/6/2016	8/25/2016	Yes	Yes	Instructors	Ringler, Zackery	Yes	2017
C	E/10/2010	012012040	V	V		SENGER, DERIK M	Yes	2018
Summer	5/10/2016	0/30/2016	res	res	Instructors	12	1	
Second	3/14/2016	5/25/2016	Yes	Yes	Instructors			

Check schedule, teachers and CDTP with no login This is what the public sees

GETTING ACCESS TO TEDRS

To log on to TEDRS click the TEDRS LOGIN button on the Traffic Education page.

To log on to TEDRS, Traffic Education

Information and resources for educators, parents and teens on driver education and teen driver safety.

Traffic Education Data & Reporting System (TEDRS)





USERNAMES AND PASSWORDS FOR TEDRS

Passwords expire after 60 days.



PASSWORD: Click on "Forgot Password?" to establish a password for the first time or if forgotten or expired. Go to the log In screen and enter username and email, and a temporary password will be emailed to the user.

Go to Administration/Change Password to change the temporary password to one that is easy to remember. The temporary password shown above is an example of the OPI password emailed to users. For best results, copy and paste, rather than attempting to type this password.

TE01 District Application in TEDRS

Due August 1 or before program begins.

TE programs MUST be approved before the first class starts.

Move through each of these tabs and complete each screen.

Instructor	Program	Vehicles	Organization	Confirmatio	n Approval		
16. Enter the	e start and com	pletion dates fo	r each program	you conduct (mus	t be scheduled so	each student receives	instruction on at least 2
	Add		Dato				
Program Da	tes: Au	TA New Flogran	TDate				
Sei	nester	Star	t Date	Complet	ion Date		
	*					Update Cancel	Delete
From Previo	ous Year's App	lication:					
Semester	Start Date Co	mpletion Date					
Second	02/22/2011 05/	15/2011					
47			undet D	afara Cabaal	During Cab	After Coher	
17. Indicate	when the follo	owing will be ta	ugnt: B	elore School		After School	Summer
(Classroom		L				
E	Behind-the-Wh	eel	Ε				
(Other		Ε				
18. Indicate	the number of	hours of instruc	tion given each	student for each o	of the following (n	nust total 60 hours, 6 of	which must be BTW)
Classroom:	0.0 Ob	servation: 0.0	Behind-the	-Wheel: 0.0	Simulation:	0.0 Other: 0.0	
19. DAYS 0		indicate the r	umber of days o	f instruction each	student will rece	ive	
20. Indicate	approximate 9	oth grade population	ation: 0				
21. How ma	ny students do	you expect to e	nroll over applic	ation period?: 0			
Save Ap	plication	Cancel					
Print Ap	plication						



Make sure the District Application is confirmed, so the OPI can approve it.

District Application
School Year: 2011 🔽 District: Drummond H S 🛛 👻
Instructor Program Vehicles Organization Confirmation Approval
STEP 1: Enter Name, E-mail and Phone. Save and Check Comments before you Submit.
District Administrative Official's Name: District Clerk Name
E-mail: DistrictClerkdhs@blackfoot.net Phone #: (406)662 - 5555 Date Confirmed: 4/8/2011
STEP 2: After you have checked the confirm box, you will not be able to change anything on the TE01 District Application. (406) 444-4432 if updates or changes are needed.
I CERTIFY that the school district Traffic Education Program for young novice drivers will be established and maintained in Public Instruction; rules 10.13.301-33. ARM; and Sections 20-7-501-507, MCA; and that all eligible youth in the geographic b
✓ I confirm that this District Application is complete and accurate.
Submit Application
Save Application Cancel
Print Application



THE TE01DISTRICT APPLICATION MUST BE APPROVED BEFORE YOU CAN ENTER TE03/TE04 STUDENT LISTS



a fire extinguisher, and an accident report form

16. If The vehicle will be properly identified with a minimum of two exterior signs.

ORGANIZATION

19.

 Indicate the start and completion dates for each program you conduct: (must be scheduled so each student receives instruction on at least 25 days.)

	Semester	Sta	art E	Date	Com	plet	ion Date						
	First	08/	'14/2	2014	1	1/30	/2014						
Indicate when	Classroom:		Ø	Before	school		During scho	ool hours	Ø	After s	chool		Summer
the following will	Behind-the-V	/heel:		Before	school		During scho	ool hours	Ø	After s	chool		Summer
be taught:	Other:			Before	school		During scho	ool hours		After s	chool		Summer
Indicate the number minimum of 6 hou	er of hours of instru urs must be behind	ttion e	ach Ineel	student v):	will recei	ve foi	the following	(must b	e a m	inimum	of 60	hours,	of which a
Classroom: 42.00	0 Behind-the-Whee	(BTW	():	6.00 C	Observati	ion:	12.00 Simu	lation:	0.00	Other:	0.00	TOTAL	HOURS:

20. DAYS: 25 Indicate the number of days of instruction each student will receive. BTW can count as part of the 25 day minimum if scheduled on separate days.

60.00

21. Indicate approximate 9th grade population: 38 22. How many students do you expect to enroll over application period?: 16

CERTIFICATION

I certify that the school district Traffic Education Program for young novice drivers will be established and maintained in accordance with current standards outlined by the Office of Public Instruction; rules 10.13.001-313. ARM, and Sections 20-7-501-507, MCA; and that all eligible yourth in the geographic boundaries of the district will have an equitable opportunity to enroll.

Lonnie Morin	04/08/2014	(406) 726-3216 Ext. 4
Signature, District Administrative Official	Date Confirmed	Daytime Phone
	OPI USE ONLY	
Approved as noted:		
Not Approved as noted:		
Fran Penner-Ray		04/17/2014
Signature, Director, Traffic Education Program		Date Approved

Validation Approval Comments

4/17/2014

SUSAN M. CARNEY's approval to teach traffic education expires October 1,2014. This instructor must renew in order for your school to run a program approved by the Office of Public Instruction.

PRINTING FORMS: Enable pop-ups for OPI sites in Chrome, Firefox and Safari if INTERNET EXPLORER is not your browser



TE06 Year-End Report – Program Data

	Year End Report
Fiscal Year: 2011 V District: Arlee H S	
TE Program TE Program (cont.) Vehicles TE	E Teachers Budget Enrollment Confirmati
A. Regarding Traffic Education, did you:	
1. <u>Offer traffic education:</u> Before School During School	TE Program (Cont.) Vehicles TE Teachers Budget Enrollment Confirmat
After School	Check all boxes for YES responses Image: Provide the second sec
 2. <u>Charge a fee</u> for each student enrolled in traffic educat 	 It. Make your traffic education program available to <u>students with disabilities</u> ? ✓ 11. Make your traffic education program <u>available to students with disabilities</u> ? ✓ 12. Teach an instructional unit on sharing the road with motorcycles ?
1st semester \$	 ✓ 13. Emphasize and require <u>use of seat belts</u>? ✓ 14. Teach an instructional unit on the effects of <u>alcohol/drugs</u> and <u>encourage students not to drink</u>?
✓ Summer \$ 200	 ✓ 15. Use OPI's current <u>Traffic Education Curriculum Guide</u>? ✓ 16. <u>Utilize computers</u> as part of the traffic education program?
3. <u>Plan to</u> , for the upcoming school year and summer,	17. <u>Conduct follow-up research</u> to determine the accident involvement and violation rate of students successf completing the traffic education program?
If yes, indicate new fee \$ 0	✓ 18. <u>Involve parents</u> in the traffic education program (<u>Parent Night</u> and/or <u>Parent Ride Along</u>)?
4. <u>Grant credit</u> for successful completion of traffic educed	I9. <u>Participate in the Cooperative Driver Testing Program (CDTP)</u> and administer the state driver license tests students?
	✓ 20. Use OPI web page or METNET to obtain traffic education information? B Indicate the title of the primary textbook you used:
	Montana State Curriculum Year: 2005
	Save Year End Report Cancel

TE06 Year-End Report - Due before July 10 to report program data and student count for reimbursement in August.



TE06 Year-End Report – Vehicle and Teacher Data

TE Program TE Program (cont.) Vehicles	TE Teachers Budget Enrol	ment Confirmation	
Check box for YES			
2. How many vehicles are used annually in your traffic edu	cation program? 1		
0. how does the district obtain traffic education vehicles? (Check all that apply)		
1. ☐ free loan 4. ☑ dis	trict owned		
2. daily fee 5. ins	tructor owned		
3. lease or rental 6. oth	er (please specify)		
🗄 🔲 Was/were your district traffic education vehicle(s) inv	volved in a crash(es) during the report	ting period?	
1. Number of traffic crashes: 0			
2. Number of persons injured: 0			
3. Number of persons killed: 0			
4. Amount of property damage: \$ 0.00			
Save Year End Report Back	TE Program TE Program (cont.)	Vehicles IE leac	hers Budget Enrollment Confirmation
Print Year End Report	F. Indicate the number of qualified instr	uctors teaching traffic educa	tion on a:
	1. 0 full-time basis	2. 1 part-tir	ne basis
	G. Indicate which <u>payment method(s)</u> and	nd <u>rate(s)/amount(s)</u> your dist	trict uses to determine traffic education instructor's salaries:
	Payment Method(s)	School Year	Summer
FFOC Veer Fred Depart	2 Weekly		
IEU6 rear End Report	3. Monthly		
e usually completed by	4. Per Pupil		
s usually completed by	5. Portion of scheduled salary		 •
he traffic education	6. Other		
	What does your payment mathed an		_
nstructor and the	School Session	Summer Session	
diatriat alark ar	hourly maximum rate: \$ 0.00	hourly maximum rate:	\$ 35.00
	10.00		
ousiness manager	hourly minimum rate: \$ 0.00	hourly minimum rate:	\$ 25.00
	Save Year End Report Back		



TE06 Year-End Report – Budget and Enrollment Data

TE Program TE Program (cont.) Vehicles TE Teachers Budget	t Enrollment Confirmation
H. 18 students completing the district traffic education program during the	this reporting period.
 List below all current fiscal year operational costs incurred including salaries for yo 	our traffic education programs, REGARDLESS OF THE FUNDING SOURCE.
Description of Traffic Education Program Expenditures	Amount
1. Gross Salaries	3812.58
2. Employer's contribution for employee's social security, retirement	291.66
3. Other employee benefits	429.80
 If vehicle is school-owned, you may calculate the yearly cost based on the current federal per-mile rate or enter actual expenses. 	0.00
5. If vehicle is leased, calculate costs based on actual expenses for lease, fuel, maintenance and installations.	300.00
6. Vehicle insurance premiums	600.00
7. Instructional equipment (computers, etc.)	0.00
8. Rental fees for video, equipment, etc.	0.00
9. Textbooks and supplies	1100.00
 Instructor professional development, training, and/or conference attendance. 	0.00
11.	0.00
12.	0.00
13.	0.00
14.	0.00
15.	0.00
Recalculate Costs	
J. TOTAL COST INCURRED (add lines I(1) through I(15)): \$ 6534.04	TE Program TE Program (cont.) Vehicles TE Teachers Budget Enrollment Confirmation
K. AVERAGE COST PER PUPIL (Line J, Total Cost is divided by Line H, Number of Stur	Idents): \$ 363 Check box for YES Indicate the number of eligible students, within the district boundaries, who desired to take to the education and
Save Year End Report Back	 who were not able to do so because of: 1. Insufficient classes:
	2. Scheduling conflicts:
	3. Other:
The TE06 can be submitted anytim	1. How does your district prioritize enrollment of students when you are unable to take all students who wish to
	enroll? a. First Come
atter the LAST traffic education cou	b. Oldest First Served
amplatas for the field was and in	c. Other
completes for the fiscal year ending	C Save Vers End Depart Reak

Print Year End Repo



June 30.

TE06 Year-End Report – Confirmation

				Yea	r End Rep	port	
Fiscal Year: 2011	Y District: Arl	ee H S	~				
TE Program	TE Progra	m (cont.)	Vehicles	TE Teache	ers Budget	Enrollment	Confirma
Preparer's Name:	District Clerk/A	uthorized Repr	esentative				\smile
E-mail: MyEmail@)mt.gov			Phone #: (4	.06) 555 - 5555	Date Confi	rmed: 4/7/2011
Click on the follow	wing box after y	you have com	pleted the Yea	ar End Report	and confirmed th	hat it is accurate) .
If you need to ma	ke a change to	the Year End	Report after y	ou have cheo	ked the box, you	will need to co	ntact OPI at (4
✓ I confirm that	this Year End F	leport is com	olete and accu	irate			
Save Year Ei	nd Report	Cancel					
Print Year Er	nd Report						

The TE06 must be confirmed to submit to the OPI for TE reimbursement. Review for data completion before checking the box to confirm. DUE BEFORE JULY 10.



TRAFFIC EDUCATION STUDENT LIST **GETTING STARTED Click Data Entry and select Student List OPI Montana Traffic Education Programs** opi.mt.gov Data Entry Reports Administration Logout Home Traffic Education Student List School Year: 2017 ∨ District: Need Help? Read User's Guide \mathbf{v}

Defaults to current school year. If summer class starts after July 1, choose the next school year.

Find your school in the district dropdown box and select.

ADD NEW STUDENT LIST

Click on the Add New Student List button to start

Hom	e Data Entry	Reports	Data Maintenance	Administration	User Maintenance	Logout	
					Traff	ic Edu	ication Student List
Sch	nool Year: 20	13 - Distric	t: Arlee H S	- 1	Need Help? Downlo	ad User Gu	
Sch	neduled Cour	se Dates:	Add New Studen	nt List 🔲 🔲 Nev	v Student List is for	a Summer	Program Check here if program will end in July or August.
No	course dates	found.					

- If the Student List is for a Summer course ending in July or August, check the box "New Student List is for a Summer Program"
- If you are unable to add a new Student List, your TE program may not be approved for this school year. Go to <u>http://opi.mt.gov/Programs/DriverEd</u> and click on Approved High School Programs to check your TE program status.

ENTER START AND COMPLETION DATES



Enter the **course start date** and the **scheduled course completion date.** Click SAVE then BACK.

SELECT STUDENT LIST

READY TO ENTER DATA!

ome Dat	a Entry Report	i Data Main	tenance Administrati	on User Maintenance	e Logout			
				Trat	ffic Educa	tion Stude	antlist	
School Yea	ır: 2013 ▼ Dist	rict: Arlee H S	;	Need Help? Dowr	load User Guide			
Scheduled	Course Dates:	Add New	Student List 🛛 🛛	New Student List is f	or a Summer Prog	ram Check here if p	orogram will end in	July or Augu
Start Date	Completed Da	te Instructor	School	Certified Notice of Participation	Certified TEP/TELL Permits Issued	Certified Notice of Completion	Certified Reimbursement Request	
07/02/2012	08/25/2012			No	No	No	No	Select

This is your school's Student List "home" screen Click **SELECT** to open the Student List.

STEP 1: INPUT STUDENT LIST

SCHOOL NAME, START DATE, INSTRUCTOR(S) NAME

Select school and verify **Date Course Started** is correct. Check box. Click **SAVE**.

Student List Status: 1. Input Student List	2. Issue TE Learner Permits 3. Input Completion	on Dates 4. Confirm Final Stu
School: Arlee High School Date Course Started: 07/02/2012	te Course Started is Correct Scheduled Course Completion	n Date: 08/25/2012
Instructor: Add Instructor Instructors: Instructor Name CARNEY, SUSAN M. Delete	Find instructor in dropdown box and click Add Instructor button.	
	Name appears here.	

Select teacher(s) and click the **ADD INSTRUCTOR** button.

STEP 1: INPUT STUDENTS

SELECT STUDENTS USING AIM LIST

Import or enter the students enrolled in the class.



- To Import AIM Students, click on the button to select students enrolled in the district. All students of eligible age in your district will be listed. Click SELECT to add the student. The Student List will alphabetize automatically.
- To search, type the first 1 3 letters of a student's last name in the *Filter by Last Name* field and click Apply Filter.
- You can sort the AIM list by Last Name rather than grade.
- Click DONE to return to Student List

STEP 1: INPUT STUDENTS

ADD STUDENTS MANUALLY

Homeschooled and out-of-district students not on the AIM list can be entered manually. Click the Add New Student button to open the entry screen shown below.

Import AIM Stu	udents 🌔 Ad	ld New Student	Filter by Las	t Name:				
Students:	Students: Birthdate No Later Than: 2/25/1998							
<u>Last Name</u>	<u>First Name</u>	Middle Name	Birthdate	Date Course Started				
				07/02/2012	Update Cancel	Delete		

- Refer to the *Birthdate-No-Later-Than* date for the student's age eligibility.
- Students must be age 14.5 before the scheduled completion date and to take the CDTP knowledge exam to receive their TELL permit.
- Middle Names are optional unless your Driver Examiner requires them.
- Click UPDATE to accept the entry.

STEP 1: INPUT STUDENT LIST

CHECK NOTICE OF PARTICIPATION FOR TE03 CERTIFICATION

Import AIM S	tudents /	Add New Student	Filter by	Last Name:			
Students:	Birth	ndate No Later Tha	an: 2/25/1998	1			
<u>Last Name</u>	<u>First Name</u>	Middle Name	Birthdate	Date Course Started			Names and birth dates can be edited
Rankin	Jeannette	Pickering	06/11/1980	07/02/2012	Edit	Delete	for accuracy.
Toole	Kenneth	Ross	08/08/1980	07/02/2012	Edit	Delete	
	1	1	1	· · _ · · · · · · · · · · · · · · ·			
NOTICE OF P with the current s	ARTICIPATION. I c tandards outlined	ertify that the stud by the Superinten	lents listed a Ident of Pub	bove are pai lic Instruction	rticipati n.	ng in our dis	strict's state-approved
Entered By (First Certified:	Name): Susan		(Last Na	ame): Carney	/		Title: Instructor
When the list is done, enter your name, title, and phone number, and check the Notice of Participation box.							
(Click <mark>SAVE</mark> a	t the bottom	of the se	creen. Y	′ou a	re done	with Step 1!

STEP 2: ISSUE TE LEARNER LICENSES

ENTER TEP AND/OR TELL DATES

Only those districts with CDTP* certification can administer the TELL test and issue permits.



Enter the date(s) the TEP and/or the TELL were issued. Click Assign Date(s) to ALL Students.

* CDTP: Cooperative Driver Testing Program

VERIFYING AGE 14.5 FOR THE TELL EXAM

OPI - Age 14.5 before TE completion

Students who will be 14.5 on or before the last day of the course can take driver's education. They can satisfy the required 6-hours of behind-the-wheel training with their instructor using the TEP.

DOJ/MVD - Age 14.5 Knowledge Exam - CDTP

When students are not yet 14.5 and the knowledge exam is given, TEDRS will show this **error message**. The system will disable printing a TELL permit for the young student. The test can be rescheduled on or after the date when the student is 14.5.

This TEDRS feature helps districts comply with the DOJ's CDTP testing age rule.

***Students must be at least 141/2 years old to be issued a TELL

			G	DL	SECTION B			SEC	TION C
Ι						5	Stud	ents Co	Complet ourse
1						Suc	ces	sful	Waive
E	Birthdate	Date Course Started	Issue Date Traffic Education Permit (TEP)	Issue Date TE Learner's License (TELL)	Date Course Completed	Yes	No	50%	Knowledge
12	2/13/1999	06/01/2015	06/01/2015	06/12/2015	07/10/2015	Ø		Ø	⊠
10	0/26/1999	06/01/2015	06/01/2015	06/12/2015	07/10/2015	Ø		Ø	⊠
1	1/19/1999	06/01/2015	06/01/2015	06/24/2015	07/10/2015	Ø		Ø	☑
07	7/18/2000	06/01/2015	06/01/2015	06/24/2015	07/10/2015	Ø		Ø	⊠
10	0/03/2000	06/01/2015	06/01/2015	06/12/2015	07/10/2015	Ø		Ø	☑
12	2/17/1999	06/01/2015	06/01/2015	06/24/2015	07/10/2015	Ø		Ø	⊠
06	5/22/2000	06/01/2015	06/01/2015	06/12/2015	07/10/2015	Ø		Ø	⊠
04	4/15/2000	06/01/2015	06/01/2015	06/12/2015	07/10/2015	Ø		Ø	Ø
05	5/02/2000	06/01/2015	06/01/2015	06/12/2015	07/10/2015	Ø		Ø	⊠
04	4/24/2000	06/01/2015	06/01/2015	06/12/2015	07/10/2015	Ø		Ø	⊠
07	7/02/2000	06/01/2015	06/01/2015	06/12/2015	07/10/2015	Ø		Ø	☑
12	2/12/1999	06/01/2015	06/01/2015	06/12/2015	07/10/2015	Ø		Ø	Ø
12	2/21/2000	06/01/2015	06/01/2015		07/10/2015	Ø		Ø	

TRAFFIC EDUCATION STUDENT LIST (AFTER TEP OR TELL)

NEW STUDENT LIST SUBMITTED WITH NOTICE OF PARTICIPATION

Page 1	MONTANA OFFICE OF PUBLIC INSTRUCTION	ATTENTION:
District Name: Arlee H S Name of Person Completing Form: Daytime Phone:	TE04 STUDENT LIST For Traffic Education Programs July 1, 2012 to June 30, 2013	Submit TE04 STUDENT LIST with the TE03 CERTIFICATION to Driver's License Examiner and OPI

Teacher(s):

CARNEY, SUSAN M.

ſ		SECTION A	GI	DL	SECTION B			SECT	ION C			
ſ		Name of Students Participating	Date Birthdata Course		Issue Date Traffic	Issue Date TE Learner's	Date	Students Completing Course				
		Name of Students Participating		Started	Se Education	License	Completed S		Successful		Waive Test	
				Otarteu	Permit (TEP)	(TELL)	•	Yes	No	> 50 %	Knowledge	Driving
	1		05/27/1997	08/12/2012	08/20/2012	08/22/2012						
	2		12/03/1997	08/12/2012	08/20/2012	08/22/2012						
0 x []	3 1.00 in		02/04/1998	08/12/2012	08/20/2012	08/22/2012					\checkmark	

Completion Date and Successful columns are blank. Waive Knowledge Test column is completed.

TRAFFIC EDUCATION STUDENT LIST STEP 2: ISSUE TE LEARNER PERMITS

<u>Last Name</u>	<u>First Name</u>	Middle Name	Birthdate	Date Course Started	TEP Issue Date	TELL Issue Date	Waive Test Knowledg	•	
Rankin	Jeannette	Pickering	06/11/1980	07/02/2012	07/02/2012	08/01/2012	Yes	Edit	Delete
Toole	Kenneth	Ross	08/08/1980	07/02/2012	07/02/2012	08/01/2012	Yes	Edit	Delete
accordance wi Entered By: First Name: S Date Certified:	th the current star usan 8/26/2016	Last N	y the Supe lame: Carr	rintendent o	of Public Instruc	tion.	Da	ytime Pl	none:
✓ TEP: TRAF teaching this of	FIC EDUCATION	PERMIT - I certify P Certified: 11/9/2	that TEP p 016	ermits have	e been issued to	the students on	the date(s) specified a	bove, w	hich a
TELL: TRA	FFIC EDUCATION Program of the M	LEARNER LICEI ontana Departme	NSE - I cert nt of Justic	ify that lear ce. 61-5-110	ner licenses hav MCA. Date Tl	ve been issued to ELL Certified: 11/	the students on the d 9/2016	ate(s) si	pecifie
Entered By:									
First Name: S	usan	Last	lame: Carn	ley	1	Teacher	Da	ytime Pł	none:
Email:									

Verify that information is correct. Edit individual students as needed. Check TEP TELL boxes and click SAVE.

Certify Permits Issued and Print Student List.

Send with Driver License Applications to Driver Examiner or County Treasurer

STEP 2: ISSUE TE LEARNER LICENSE

Districts with CDTP* certification can administer the TELL test and issue permits. They can also print the CDTP Road Test Forms (added 2014).

Click the **Print TELL Permits** under the Certification sections

* CDTP: COOPERATIVE DRIVER TESTING PROGRAM

Date:	man and a second second		10000				
Name:	08/01/2012		Driver License	Number:			
rearine.	Jeannette Picker	ng Rankin					
Addres	i5:						
City:			State:		ZID:		
Bastela	tonr:		100000			Line	nea: Class
Resinc	aons.						nse: Glass
DOB:	06/11/1980	Sex:	Wt	Ht	Hair	22	Eyes:
Applica	ant's Signature:						
Traffic	Education Learner	s License (TELI	.): Good for the	operation of a (Class D vehi	cie only v	vhen
accom	panied by a licensed	parent or driver	education Instru	ictor occupying	the seat bes	Exp.	iver.
The TE	ELL is valid for 1 yea	ar from the date	the knowlege t	est was passed	1.	Date:	08/01/20
Examin	her /		Station /				
Examin Instruct	tor:		Station / School: School: S Traffic Educ (Arlee High Sci tate of Montan sation Learne TELL) Permit	nool a er's Licens t	Dat	e:
Examin Instruct Mater Date:	tor:		Station / School: School: S Traffic Educ (Driver License	Arlee High Sci tate of Montan cation Learne TELL) Permit Number.	nool a r's Licens t	Dat	e:
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Traffic Education Learner License

Motor Vehicle Division Safety + Efficiency + Dependebility	Traffic	State of Mon c Education Lea (TELL) Per	tana rner's L mit	icense
Date: 09/03/2014	Name:			
Address:				
City:	Stat	:e:	Zip:	
Restrictions:				License: Class D
DOB: 07/21/1999	Sex:	Weight:	Ht:	Eyes:
Applicant's Signature: Traffic Education Learner's Licen driver education instructor occupyin with 10 hours at night and no alcohe driver exam station. Schedule your year from the date the kn	se: Good for the operation of a g the seat beside the driver. S al, drug or traffic violations.) Aftu driving test at www.doj.mt.gow owledge test was pas	a Class D vehicle only whe months and 50 hours of ar <u>02/15/2015</u> , you may ap driving or call 1-866-450-8 sed.	n accompani supervised d ply for a First 034. The 1	ed by a licensed parent or riving practice are required t Year Restricted License at a FELL is valid for one
Applicant's Signature: Traffic Education Learner's Licen driver education instructor occupyin with 10 hours at night and no alcohe driver exam station. Schedule your year from the date the kn	se: Good for the operation of a g the seat beside the driver. S ol, drug or traffic violations. Aft driving test at www.doj.mt.gov owledge test was pas	a Class D vehicle only whe months and 50 hours of ar <u>02/15/2015</u> , you may ap driving or call 1-866-450-8 sed.	n accompani supervised d ply for a First 034. The T Expiratio	ed by a licensed parent or riving practice are required t Year Restricted License at a FELL is valid for one on Date: <u>09/03/2015</u>

The TELL is effective for one year. The date shown here is six months from the TEP date. MVD Driver Examiners can login to TEDRS and view/print all districts' Student Lists.

CDTP Road Test Forms

otor venicie bivision	olona MT 50620 4420	* Dhone (406) 444.2	033 * doi mt gou/driving	
Applicant Legal Name (please print):	elella, WT 59620-1450	Phone (406) 444-5	955 adj.mt.gov/ariving	
Last: Toole	rst: Kenneth		Middle or Maiden:	
Driver License Number:	Date	of Birth: 08/08/1920	-	
Applicant Signature:			Date:	
Examiner/Instructor Signature:	Exan Printe	Examiner/Instructor Printed Name:		
G	ENERAL DRIVING	EHAVIOR		
Used brakes properly (smooth braking, no riding or pumping Proper steering (no over/under, one finger) Understood controls General car control, good Attitude, good)	F Accie F Com F Vehic F Vehic F Faile	dent mitted dangerous act cle over sidewalk or lanes cle over stop lines when p d to obey all traffic signs,	edestrian present signals, and laws
	DRIVING TE	ST		•
Image: Turking sector of the sector of th		SKILL allel Parking: sking: ving ore aminer ccessful 8 Un strictions:	IEST	COMMENTS

Save Back			
Print Student List	Print Certificates of Completion	Print TELL Permits	Print CDTP Road Test Forms
Reassign Student	List to Year: 2014 -		

TRAFFIC EDUCATION STUDENT LIST STEP 3: INPUT COMPLETION DATES

If the **Course Completion Date** has changed, enter final date and verify by clicking box and then SAVE.

Student List Status: 1. Input Student	List 2. Issue TE Learner Permits 3. Input Completion Dates 4. Confirm Final Student List
School: Dawson High School 🗸	
Date Course Started: 01/30/2017	Actual Course Completion Date: 04/18/2017
	Use Edit and Update on individual student rows for exceptions.
	WAIVE DRIVING TEST Click to assign YES for ALL students. Edit and Update for exceptions.

- Then, check the Actual Course Completion Date box to automatically enter the date into the form's Date of Completion column.
- If you give the CDTP Road Test, click the Waive Driving Test button.
- Edit any students you will not waive on the form.
- Remember, the Driver Examiner will retest about 10% of the students on this form as a way to monitor the CDTP. So, a student you waive may be required to retake the driving test.

TRAFFIC EDUCATION STUDENT LIST READY FOR DRIVER EXAMINER OR COUNTY TREASURER

District Name:		ALLEN IMA.		Page 1	MONT	ANA OFFICE C	OF PUBLIC INS	TRUCTION		ATTEN	TION:
Arlee H S	TE03 CERTIFICATION	Submit TE03 CERTIFICATION		District Name:	Ι.			IST	Sut	bmit TE04 S	TUDENT LI
Name of Person Completing Form:	For Traffic Education Programs	with the TE04 STUDENT LIST		Arise H S Name of Person Completing Form:	Fo	r Traffic Edu	lucation Prop	grams		with	the
Daytime Phone:	July 1, 2012 to June 30, 2013	to Driver's License								to Driver's	License
Title:		Examiner and OPI		Daytime Phone: Title: Instructor	l `	July 1, 2012	to June 30,	2013		Examiner	and OPI
TE03 CERTIFICATION											
Non-CDTP Program	CDTP Program Notice of TELL (Traffic Education Learner Lic	ense)		Teacher(s):							
									COTION D		
A. NOTICE OF PARTICIPATION When class begins or TEP is issued, sign b	blow and send conv of Forms TE03 and TE04 to local Driver's Liperse Evanit	er or County Treasurer		SECTION A					ECTION B	Student	s Completin
	~			Name of Students Participating	Birthdate	Date Course	Issue Date Traffic	Issue Date TE Learner's	Date Course	(ourse
I certify that the students listed in Section A, TE established and maintained in accordance with	E04 Student List, are participating in our district's state-approved traffic educati the current standards outlined by the Superintendent of Public Instruction.	on program that is				Started	Education Permit (TEP)	License Cr (TELL)	ompleted	Successf	ul Waive
Susan Carney	Instructor (+	406) 444-4432 08/16/2012								Tes No	
Researce: District Asian Interaction (2011)				Rankin, Jeannette Pickering Toole, Kennette Poss	06/11/1980 0	7/02/2012	07/02/2012	08/01/2012			
argmature. District Administrative Official	I further certify that this program is in full compliance with the Concernitive Drive	ar Testing Program of the		~ 1 Toble, Kenneth Ross	00/00/1900	1102/2012	01/02/2012	00/01/2012			
Department of Justice and that TELL permits ha	ave been issued to the students indicated on TE04 Student List.	a saving magnetic to the						Total St	udents Eli	gible for Re	mburseme
Susan Carney	Instructor	406) 444-4432 08/16/2012									
Signature, District Administrative Official											
B. NOTICE OF COMPLETION											
When class is completed, sign bolow and s	end copy of TE03 and TE04 to local Driver's License Examiner or County Trea	isurcr.									
completed our district's state-approved traffic ed	indicated in Section B, and marked "res" in Section C, 1604 Student List, na ducation program that is established and maintained in accordance with the cur	rent standards cutlined									
by the Superintendent of Public Instruction, and	are eligible for licensing upon reaching the required minimum age.										
Signature, District Administrative Official											
Signature. District Administrative Official											
Signature. District Administrative Official C. REIMBURSEMENT REQUEST											
Signature, District Administrative Official C. REIMBURSEMENT REQUEST When class is completed, submit TEG3 and	I TEG4 to the OPI Traffic Education Office.								-		_
Signature, District Administrative Öfficial C. REIMBURSEMENT REQUEST When class is completed, submit TEG3 and I confly that the students checked successful or education program lital is eskiblished and main	TEG4 to the OPT Traffic Education ORIce Immunocessful in Section c. TEG4 Studier Interior in accordance with the current section of the Control of the Contr	oato a ndi	f conv	of your TE	N 3 :	an	гь	FO.	Л	cli	ck
Signature Diatric Administrative Official C. REIMBURGEMENT REQUEST When class is completed, submit 7253 and loadify that the students checked successful - ceducator program that is established and main are eligible for state reinhumement. I also cent infibility for state reinhumement.	TEG4 to the OPT Traffic Education Office runsuccessful in Bedford, TEB4 Student indenici naccontane with the carriest star By that any student net completing at least	eate a pd	f copy	of your TE	03 a	ano	d T	-E0	4,	cli	ck
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STEP 3: EDIT INDIVIDUAL STUDENTS

FINALIZE STUDENT LIST SHOWING STUDENT PROGRESS



UPDATE.

If a student dropped the course before they could complete 50% of the classroom instruction and 50% of the drives, uncheck the More Than 50% box.

VALIDATIONS TEDRS STUDENT LISTS

AGE 14.5 AND SUCCESSFUL COMPLETION AGE 16

*** Students must be at least 14.5 years old to be issued a TELL. **TELL permits are no longer valid for students under age 16 who do not successfully the course.

Date Course Started	TEP Issue Date	TELL Issue Date	Waive Knowledge Test	Date Course Completed	Successful Completion	More Than 50%	Waive Driving Test		
05/31/2016	06/07/2016	***	No	08/15/2016	Yes	Yes	Yes	Edit	Delete
05/31/2016	06/07/2016	**	No	08/15/2016	No	Yes	No	Edit	Delete
05/31/2016	06/07/2016	06/23/2016	Yes	08/15/2016	Yes	Yes	Yes	Edit	Delete
05/31/2016	06/07/2016	06/10/2016	Yes	08/15/2016	Yes	Yes	No	Edit	Delete

STEP 4: CONFIRM FINAL STUDENT LIST

CHECK THE LAST TWO CERTIFICATIONS TO FINALIZE THE LIST

District Authorized Repre NOTICE OF COMPLE [®] program that is established minimum age.	sentative (AR) needed for TION. I certify that the stud ed and maintained in acco	this approval. lents with completion dates ir rdance with the current stand	ndicated in the list abov lards outlined by the S	ve and marked 'Yes' uperintendent of Pul	have successfully completed our district's a blic Instruction, and are eligible for licensing
Entered By (First Name):	Charles M	(Last Name): Russell		Title: Principal	Daytime Phone: (406
District Authorized Repre REIMBURSEMENT RI established and maintain completing at least 50 per Total Student Count: 2 Entered By (First Name): Date Certified: 8/17/2012	sentative (AR) needed for EQUEST. I certify that the s ed in accordance with the rcent of the class, and so c Charles M	this approval. students checked successful current standards outlined b checked above, is ineligible fo (Last Name): Russell	or unsuccessful in the y the Superintendent o or state reimbursement	e list above have con f Public Instruction a Title: Principal	npleted our district's state-approved traffic o and are eligible for state reimbursement. I al Daytime Phone: (406

- When all the student data is updated and final, check the **Notice of Completion** and **Reimbursement Request**, electronically sign the certification and click SAVE.
- You're done with Step 4!
- You can now print the form for the Driver Examiner or County Treasurer.
 AND
- You can print Certificates of Completion for the students.

PRINT CERTIFICATES OF COMPLETION



Montana Traffic Education Certificate of Completion

Jeannette Pickering Rankin, Birthdate 06/11/1880, successfully completed the Belgrade H S Traffic Education Program which was conducted from 05/11/2016 through 06/19/2016.

Belgrade H S offers an approved Montana Traffic Education program which meets or exceeds state requirements including:

- a minimum of 25 instructional student-contact days for each student,
- at least 60 hours of structured Traffic Education learning experiences,
- including at least 6 hours of in-traffic Behind-The-Wheel (BTW) training,
- all provided by a Montana Office of Public Instruction-approved Traffic Education teacher.

			06/19/2016
Traffic Education Teac	her/		Date
School District Official			
Belgrade H S			
<u>Belgrade, MT</u>			
Save Back			
Print Student List	Print Certificates of Completion	Print TELL Permits	Print CDTP Road Test Forms
Reassign Student Lis	st to Tean 2014 -		

Traffic Education Student List Done!

All certifications are checked and the form is saved. Print for the driver examiner or county treasurer. Always submit TE03 and TE04 together.

Do not mail Student Lists to OPI. When all certifications are checked, it has been submitted online via TEDRS.

Next page shows the printed form.

	Tra	ffic Education St	udent List
School Year: 2013 🔽 District: Stevensville H S	Need Help? Rea	nd User's Guide	
New Student List is for a Summer Program Chec	sk here if program will end i	n July or August.	
Student List Status: 1. Input Student List 2. Is	sue TE Learner Permits	3. Input Completion Da	tes 4. Confirm Final Student List
School: Stevensville High School 📃			
Date Course Started: 09/25/2012 Actual Co	ourse Completion Date: 12/07	7/2012 Save	
2			
NOTICE OF PARTICIPATION. I certify that the students listed a ccordance with the current standards outlined by the Superinter	bove are participating in our distri ndent of Public Instruction.	ct's state-approved traffic education p	rogram that is established and maintained in
ntered By (First Name): ^{John} (Last Nar ate Certified: 1/11/2013	me): Munk	Title: Teacher	Daytime Phone: (406) 777 - 5539
TEP OR TELL PERMITS ISSUED. I certify that TEP or TELL per esting Program, I further certify that this program is in full comp ntered By (First Name): John (Last Nar	rmits have been issued to the stude liance with the Cooperative Driver me): Munk	nts on the date(s) specified on TEO4 S Testing Program of the Department of Title: Teacher	Student List above. If this is a Cooperative Driver of Justice. Daytime Phone: (406) 777 - 5539
ate Certified: 1/14/2013			
istrict Authorized Representative (AR) needed for this approval. 7 NOTICE OF COMPLETION. I certify that the students with com ducation program that is established and maintained in accorda aaching the required minimum age.	pletion dates indicated in the list a ance with the current standards out	bove and marked 'Yes' have success lined by the Superintendent of Public	ully completed our district's state-approved traffic c Instruction, and are eligible for licensing upon
ntered By (First Name): Brian (Last Nar ate Certified: 1/14/2013	me): Gum	Title: Principal	Daytime Phone: (406) 777 - 5481
istrict Authorized Representative (AR) needed for this approval.			
7 REIMBURSEMENT REQUEST. I certify that the students checke stablished and maintained in accordance with the current stand udent not completing at least 50 percent of the class, and so che otal Student Count; 21	ed successful or unsuccessful in the lards outlined by the Superintender ecked above, is ineligible for state	list above have completed our distri nt of Public Instruction and are eligib reimbursement.	ct's state-approved traffic education program that is le for state reimbursement. I also certify that any
ntered By (First Name): Brian (Last Nar ate Certified: 1/14/2013	me): Gum	Title: Principal	Daytime Phone: (406) 777 - 5481
ave Back Print Student List Print Certificates of Completion	Print TELL Permits	Reassign Student List to Ye	ar: 2013 💌
Save Back			
Print Student List Print Certificate	s of Completion	Print TELL Permits	Print CDTP Road Test Forms
Reassign Student List to Year: 201	14 🗸		



TE03 CERTIFICATION

CDTP Program Notice of TELL	Page 2 District Name: Great Falls H S Name of Person Completing Form: Lorrie Mayer Daytime Phone: (406) 268-6015 Title: Administrative Assistant	MONTANA OFFICE OF PUBLIC INSTRUCTION TE03 CERTIFICATION For Traffic Education Programs July 1, 2011 to June 30, 2012	Submit T TE04 to D Ex.	ATTENTION: E03 CERTIFICATION with the STUDENT LIST Priver's License aminer and OPI
Notice of Participation	A. NOTICE OF PARTICIPATION When class begins or TEP is issued, sign below and se	✓ CDTP Program Notice of TELL (Traffic Education Learner CDTP Program Notice of TELL (Traffic Education Learner CDTP Program Notice of TELL (Traffic Education Learner)	er License) xaminer or County Treasurei	:
TEP and/or TELL permits issued	I certify that the students listed in Section A, TE04 Student established and maintained in accordance with the current Lorrie Mayer Signature, District Administrative Official If this is a Cooperative Driver Testing program, I further cert	List, are participating in our district's state-approved traffic ed standards outlined by the Superintendent of Public Instruction. Administrative Assistant	lucation program that is (406) 268-6015 Driver Testing Program of th	03/22/2012 ie
Notice of	Lorrie Mayer	Administrative Assistant	(406) 268-6015	04/10/2012
The OPI accepts	Signature, District Administrative Official B. NOTICE OF COMPLETION When class is completed, sign below and send copy of	TE03 and TE04 to local Driver's License Examiner or County	Treasurer.	
electronic signatures on	I certify that the students with completion dates indicated in completed our district's state-approved traffic education pro by the Superintendent of Public Instruction, and are eligible	Section B, and marked "Yes" in Section C, TE04 Student Lis gram that is established and maintained in accordance with th for licensing upon reaching the required minimum age.	st, have successfully le current standards outlined	
the TE03	Lorrie Mayer	Administrative Assistant	(406) 268-6015	04/10/2012

TEDRS REPORTS STUDENT SEARCH

				Fraffic Education	on Studer	nt Search			
District:	Billings H S		✓ Last Name:	v	First Name:		Search	Reset Searc	:h
Last N: V 12345!	ame First N: 	ame Birth Da	ite 10 Select						
Last Name	First Name	Birth Date	Course Start Date	Course Completed Date	Date TEP Issued	Date TELL Issued	Successful Completion	Waive Test Knowledge	Waive Test Driving
V		03/02/2000	09/16/2014	11/18/2014	09/16/2014	09/29/2014	Yes	Yes	No
	ī	Question Fhank you f	is? Call OPI's T for your partne For more int	Fraffic Education of rship in providing of formation on the required	fice: (406) 44 driver's educ Traffic Education	4-4432 or (88 ation and trai	8) 231-9393 e ining for Mon <u>click here</u>	ext. 4432 Itana teens.	
	Find St New D	tudent S ecembe	Search in ⁻ er 2015	TEDRS Repo	orts Tab	Home	Data Entry S S U U	Reports tudent Count F tudent List Rep tudent Search ser's Guide ear End Repor	Administratio

TRAFFIC ED STUDENT LIST BEST PRACTICES

Create the student list at the start of your traffic education class and use ONLY this list to manage your class. Login and finalize the list at the end.

If you need to edit the student names and/or birth dates selected from the AIM list, please give those same corrections to the school clerk who enters enrollment data into AIM.

Fill out the form completely and check off all certifications to make sure the list is submitted electronically to the OPI. All stages will be green at the top of the screen, when the student list is ready to submit.

1. Input Student List 2. Issue TE Learner Permits 3. Input Completion Dates 4. Confirm Final Student List

Make sure your District Office has a copy of all forms printed out and submitted to the Driver Examiner or County Treasurer. They must be kept on file for at least five years.

Submit the form twice to the Driver Examiner/County Treasurer: first when the class begins and the TEP or TELL is issued (Notice of Participation), second when the class completes (Notice of Completion).

For assistance, call the Traffic Education Office at (406) 444-4432 or

email Patti Borneman pborneman@mt.gov.

GDL First-Year Restricted License

Seatbelts required –

for everyone – all the time

Passengers –

First 6 months – only one Second 6 months – up to 3

Best Practices:

No passengers

Night restrictions

11:00 PM – 5:00 AM

Best Practices:

The real risk is darkness

Parents are the Key to Teen Driver Safety

GRADUATED DRIVER LICENSING

Montana Graduated Driver Licensing (GDL) is a 3-step program to reduce risk and help teen drivers gain driving experience. All new drivers under age 18 must follow these conditions to get a driver license in Montana.

THE GDL STEPS

1. LEARNER LICENSE

- Pass the written test.
- Drive with adult supervision: 50 hours (10 hours at night) for at least 6 months.
- NO alcohol, drugs or traffic tickets.
- MUST WEAR SEAT BELT.

2. GDL RESTRICTED LICENSE

- Limits passengers and night driving.
- NO alcohol, drugs or traffic tickets.
- MUST WEAR SEAT BELT.

3. FULL DRIVER LICENSE

 After one year on the GDL Restricted License with NO alcohol, drugs or traffic violations.





The risk of a fatal crash goes up in direct relation to the number of teens in the car



CHAPTER 1: THE DRIVER LICENSE

 ADAPTED ILLUSTRATED MONTANA DRIVER MANUAL





Highest lifetime crash risk is in the first year of independent driving. Lowest risk is when driving with your parent or guardian.

Motor Vehicle Division Safety + Efficiency + Dependability	Parent/Legal Gua Certification	rdian	
P.O. Box 201430 Helena, MT 5	9620-1430 • Phone (406) 444-3933 • Fa	x (406) 444-1631	doj.mt.gov/driving
Instructions: Parent/Legal Guardi the applicant, who is under 18 yea instruction permit, traffic education	an - complete this form and submit rs of age, has completed the minimu learner license, or traffic education	t to the Driver E m six-month per permit.	xamination Station after iod for holding an
-ull Legal Name of Minor Applicant:		Date of	Birth:
 applicant: has completed 50 hours 	of supervised driving experience, 10 of a traffic violation or convicted or a	of which were a djudicated for ar	t night; v offenses involving
 has not been convicted alcohol or drugs during to has no pending traffic al 	the six-month period immediately pr cohol or drug citations.	eceding this appl	ication; and
 has not been convicted alcohol or drugs during t has no pending traffic al Parent or Legal Guardian Signature	the six-month period immediately pr cohol or drug citations.	Parent/L. Gu	ication; and
 has not been convicted alcohol or drugs during to alcohol or drugs during to has no pending traffic al Parent or Legal Guardian Signature Printed Name of Parent or Legal Guardian Signature 	the six-month period immediately pr cohol or drug citations.	Parent/L. Go	ication; and

TRAFFIC EDUCATION DATA AND REPORTING SYSTEM (TEDRS)



Thank you for submitting your Student List and Certifications via the OPI's TRAFFIC EDUCATION DATA AND REPORTING SYSTEM (TEDRS)!

Questions – call OPI-Traffic Education (406) 444-4432