



**Other requirements: (provide detailed documentation)**

Online classroom driver education programs can only be approved if they demonstrate compliance with all applicable state and federal laws, rules and DVS Policies. DVS may request additional information as part of the approval process. All elements must be approved to the satisfaction of DVS. Please submit documentation demonstrating:

- A means for the student to measure performance outcomes.
- Student and parent progress tracking to ensure completion.
- DVS approved instructor online program records.
- DVS minimum security attestation (documentation demonstrating that the online classroom driver education program meets DVS minimum security requirements, as described in MOU).
- Online curriculum with rotating quiz questions.
- Online student contracts with Tennesen Notice.
- Usernames, passwords, and access to audit the program.

**Attestation**

I understand that DVS is responsible for the approval of all driver education schools and programs as stated in Minnesota Statute 171.33. I understand that the information collected and requested in this application, the MOU or any documentation provided through the application process, or auditing process, is for the purpose of demonstrating compliance with Minnesota rule, law, and DVS policy for the approval to offer an online classroom driver education program to eligible students. I understand that, once approved, I am statutorily obligated under section 171.396 (a)(6) to ensure that only a Minnesota licensed or approved driver education instructor will be allowed to monitor a student’s progress and/or respond to their questions. I understand and agree to maintain records for five (5) years as evidence of compliance with this statutory obligation. I understand that DVS may request more information in the interest of data security. I understand that in the event of the applicant’s noncompliance with any applicable Minnesota rule, law, or DVS policy or the corresponding MOU, the license for a commercial driver training school may be subject to revocation.

I certify that the online classroom driver education program will always be available for auditing and will update, suspend, or cease the operation of the online classroom driver education program within one (1) business day at DVS request. I assume full responsibility to ensure that all partnered affiliates, contractors and/or vendors (if any) submit to, cooperate with, and participate in all DVS security requests and measures. I assume full liability for the security, integrity, conduct, maintenance and legitimacy of the online classroom driver education program and anyone acting on its behalf.

I, the undersigned, swear (affirm) that I have read the entire foregoing application, that I am familiar with its contents and that all answers, statements and all other matters contained therein are true.

\_\_\_\_\_  
**Authorized official's signature**

\_\_\_\_\_  
**Date**

**Return completed application to Driver and Vehicle Services:**

Driver & Vehicle Services  
Office of Driver Education  
445 Minnesota Street, Suite 176  
St. Paul, MN 55101-5176  
Fax (651) 296-5316

Email: [driver.education@state.mn.us](mailto:driver.education@state.mn.us)

