

## Verification of Identity and/or School Attendance

Learner's Permit Applicants: Maryland Staschool attendance in the prior school seme Sections B and D of this form.					
<b>Verification of Identity:</b> This form may also be used to verify the identity of an applicant named in Section A. To verify the applicant's identity, School Official or Home School Coordinator must <b>complete Sections C and D</b> of this form.					
This form applies to public, private and hon Section A: Must be completed by the appli Sections B, C, & D: Must be completed by	cant.	Coordinator.			
Please select the requirement(s) this form is being used for:					
School Attendance: School Official MUST complete Sections A, B, and D.					
Verification of Identity: School Official MUST complete Sections A, C, and D.					
Section A: Applicant To be completed by the Applicant:					
Printed Last Name of Applicant	Printed First Name of Applicant	Printed Middle Name		Date of Birth (mm-dd-yyyy)	
Timed Last Name of Applicant	Trinica First Name of Applicant	Timed Middle Name		Date of Birth (min da yyyy)	
Residence Street Address		City	Sta	te/ Zip Code	
The information I have provided above on this certification is true, complete, and correct to the best of my knowledge, information and belief.					
Applicant's Signature Parent's/Guardian's Signature			Date		
Section B: School Official/Home School Coordinator Must answer BOTH questions below.  1. Is the applicant, named in Section A, home schooled?  YES NO					
2. Has the applicant had 10 or less unexcused absences during the prior school semester?  — YES — NO					
Section C: Verification of Identity					
Does the information in Section A accurately identify the applicant enrolled in your school or home school program for the preceding 12 months according to official school records?   YES   NO					
Section D: School Official/Home Schooling Coordinator					
Printed Name & Title of School Official or Home Schooling Coordinator		Printed Name of School or Home School Organization		Telephone Number	
Address of School/Home School Organization	School/Home School Organization City		State/Zip Code		
Signature of School Official or Home Schooling C	oordinator				
The applicant's information has been verifie knowledge, information and belief.	d and I certify the information provide	ded on this form is true, c	omplete and c	correct to the best of my	
		Offic	cial School Sta	amp or Seal Only	
This form must be placed in a sealed envelover flap. The applicant must present the sea time of the application process. If the seal is this certification will be null and void. This cachool stamp or seal.	aled envelope to an MVA official durin tampered with or broken on the enve	g the lope,			
Please place <b>OFFICIAL</b> school stamp or seal in this box and across flap of envelope.					