

AFFIDAVIT AND REQUEST TO TAKE DRIVING SAFETY COURSE

YOU MUST GET COURT APPROVAL BEFORE TAKING THE DRIVING SAFETY COURSE

NAME: _____ **TX DL#:** _____
(PLEASE PRINT NAME AS SHOWN ON DRIVERS LICENSE)

The above-named defendant, having duly sworn upon oath states the following:

1. I waive my right to trial and enter a plea of **NO CONTEST** and request the Court defer proceedings for 90 days so that I may complete an approved Driving Safety Course.
 2. I **HAVE NOT** completed a Driving Safety Course for a traffic citation within one year (12 months) of the date of this request, nor am I currently taking one.
 3. I **DO HAVE A VALID** Texas Driver's License; I **DO NOT** Possess a Commercial Driver's License (CDL) or CDL permit. **COPY MUST BE ATTACHED TO THIS AFFIDAVIT.**
 4. I have a personal auto insurance policy, a certificate of self-insurance, or a financial responsibility certificate. **IMPORTANT NOTE:** your request for driving safety course will be denied unless you submit proof that you are insured as required by law. **COPY MUST BE ATTACHED TO THIS AFFIDAVIT.**
 5. **UPON COMPLETION OF THE COURSE**, I will provide THE SIGNED COURT COPY OF THE COMPLETION CERTIFICATE, and a type 3A Certified Driving History Record from the Texas Department of Public Safety.
 6. **PAYMENT IS DUE UPON COMPLETION OF COURSE** and will be sent in with driving record and signed driving safety course completion certificate.
 7. **DO NOT START TAKING ANY COURSE UNTIL APPROVED BY THIS COURT.**
- I have enclosed Proof of Insurance, Copy of my Driver's License, and the Notarized Affidavit.

Defendant's Signature _____ DATE _____

Mailing Address _____

Telephone # _____ EMAIL _____

Sworn to before me the _____ Day of _____ 20____

Notary Public in and for the State of Texas

OFFICE USE ONLY
____ APPROVED
____ DENIED
DATE _____
INITIALS _____