



Kansas State DEPARTMENT OF EDUCATION

Available on-line at: https://forms.gle/zBcRF2mibxYRUNjK8

APPLICATION FOR MOTOR VEHICLE IDENTIFICATION - DRIVER TRAINING SCHOOL

Na	me of School						
Ad	dress of School						
Er	Street nail address		City	State	Zip Code 		
	Is this school approved ar		Driver Tra	aining School	in Kansas?		
2.	Please check all that app Is this car equipped with a (Passenger visor not acceptal) Student Driver Sign?	required dual co ole) Seat belts?					
3.	Has evidence of required amounts noted) been filed w	•		•	•		
4.	Does the vehicle have ma	nual shift?	Aut	omatic?			
5.	Registered license plate n Put additional cars on bac		e(s)				
6.	Model of car Make of car A car's make is the brand of the sometimes a range of products.	vehicle, while the mo	odel refers to				
	Put additional cars on back of page. ⇒						
	Application is hereby made for a Driver Training School Identification certificate.						
		or Name (Print					
	Position						



Form 179 E (rev. 11.8.2019)

Please return this completed form along with a Certificate of Insurance to Driver Education, LSOB, 900 SW Jackson St, Suite 106, Topeka, KS 66612 or email rmeinholdt@ksde.org

MODEL	REGISTERED LICENSE PLATE #	YEAR	MAKE