

PARENTAL CONSENT FORM

PARENTAL CONSENT FORM MUST BE FILLED OUT AND SIGNED BEFORE A NOTARY PUBLIC OR DRIVER LICENSE EXAMINER

I certify that I am a Parent/Guardian of (print full legal name) _____
Date of Birth _____ and I hereby grant permission for her/him to:
(Check all that apply)

- Apply for a South Dakota driver license or permit under the requirements of South Dakota law;
 - Has completed 50 hours of adult supervised driving since the issuance of the Learner's Permit.
- Apply for a South Dakota non-driver identification card under the requirements of South Dakota law;
- Have the organ/tissue donor indicator placed on the driver license, permit, or non-driver identification card.

Parent/Guardian Signature _____ Print name _____
Present address _____
City _____ State _____ Zip _____

Subscribed and sworn to before me on this _____ day of _____, 20____

Notary Public, State of South Dakota

My Commission Expires:

Notary Public's Seal:

Driver License Examiner's Signature/Employee #

This form is valid for 6 months from the date given by the Notary Public or Driver License Examiner.

ELECTRONIC NOTARIES WILL NOT BE ACCEPTED.

CALIFORNIA NOTARY PAGE MUST SPECIFY THE DOCUMENT BEING SIGNED.



SOUTH DAKOTA
DEPARTMENT
OF PUBLIC SAFETY

prevention ➤ protection ➤ enforcement