

# 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.

**CALIFORNIA NOTARY PAGE MUST SPECIFY THE DOCUMENT BEING SIGNED.**



SOUTH DAKOTA  
DEPARTMENT  
OF PUBLIC SAFETY

prevention ➤ protection ➤ enforcement