

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

I certify that I am a Parent/Guardian of (print name) _____
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;
- ___ 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 Code _____

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

My Commission Expires:

Notary Public or Driver Examiner
State of South Dakota

LOST LICENSE/IDENTIFICATION CARD CERTIFICATION

If you are applying for a duplicate, renewal or transfer of your driver license or identification card, and have lost the last driver license/identification card issued to you, complete this section:

I have lost or destroyed the last driver license or identification card issued to me by the state of _____ and it is not now in my possession. I fully realize that by making this statement, said license/identification card is null and void and may not be used for operating a motor vehicle or for identification purposes.

Signature _____

EXAMINER USE ONLY

Commercial Learners Permit Restrictions: P X Commercial Driver License Restrictions: E K L M N O V W Z

Driver License Restrictions: B C E F G I R Y

VISUAL ACUITY

LEFT EYE BOTH EYES RIGHT EYE
20/ 20/ 20/

___ **W/O CORR LENS** ___ **WITH CORR LENS**

NEW ___ RENEWAL ___ DUP ___

TRANSFER ___ DATA CHANGE ___

- GK ___
- CV ___
- AB ___
- DT ___
- TK ___
- HZ ___
- PV ___
- SB ___

3RD PARTY CDL ___ COMPLETION DATE _____

DRIVERS ED ___ COMPLETION DATE _____

MC SAFETY ___ COMPLETION DATE _____

COMPUTER CHECKS: CDLIS ___ PDPS ___

SAVE ___ SSN ___

TEST REQUIRED: VISION ___ KNOWLEDGE ___ SKILL ___

KNOWLEDGE TEST _____

SKILLS TEST _____

FEE COLLECTED ___ Q ___ C ___ T ___ EXAMINER ID _____

LICENSE SURRENDERED? _____

STATE ___ CLASS ___

COMPLIANT ___ NON-COMPLIANT ___

Documents Presented

U.S. Citizen

- ___ Compliant DL/ID
- ___ U.S. Birth Certificate
- ___ U.S. Marriage Certificate
- ___ U.S. Passport
- ___ Certificate of Birth Abroad
- ___ Citizen/Natural. Cert.

Non-Citizen

- ___ Perm Res. Card
- ___ Foreign Passport & I-94
- ___ Emp. Auth. Doc.

Address

- ___ Address docs

Social Security

- ___ SS Card
- ___ W-2 Form
- ___ 1099 Form
- ___ Payroll stub

I, _____ am choosing to drop my CDL and/or CDL endorsement(s). I understand that when/if I want to obtain my CDL license or endorsement(s) again, I will have to complete all required knowledge and skills tests.

Driver's Signature: _____ Date: _____

Notes: _____

