



HICKORY DRIVING SCHOOL

Student's Name	
Date of Birth	
Attending High School	
Parent's Name	
Parent's Phone (Cell Preferred)	
Parent's Email	
Address	
City, State, Zip	
Obtained Permit (Circle One)	Yes or No
*** Answer Questions Below if Permit is Obtained***	
Permit Number	
Permit Expiration Date	
Driver Test Eligibility	