STATE OF HAWAII
Department of Transportation

ACKNOWLEDGMENT OF PRACTICE DRIVING

STATE OF HAWAII, ]
COUNTY OF__________________________

) SS.

I, ________________________________, do solemnly swear or affirm under penalty of perjury that
I am a parent or legal guardian of ___________________________________________ (minor), and that based on
my personal or otherwise reasonably obtained knowledge, said minor has completed forty hours of day-time driving,
and ten hours of night-time driving, supervised by a licensed driver over the age of eighteen.

Subscribed and sworn to before me this ________________

day of _______________________________, 20________

____________________________________
Signature of Parent/Guardian

My commission expires:

HDOT 1200