STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

CERTIFICATION OF DRIVING EXPERIENCE OF A MINOR

I do hereby certify
that_____ , a minor,
First Middle Last

date of birth _____ has driven a minimum of 50 hours during the past 12 months, of which 10 hours of driving were at night per Section 322.05(3), Florida Statutes.

_____ _____
Signature of Parent, Legal Guardian or Print Name
Responsible Adult

STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____day of
_____, 20_____,

By _____ who is personally known to me or produced identification

_____ as proof of identification.
(Identification type and number)

_____
Notary Public or DL Examiner-Signature

_____
Print, Type, or Stamp Commissioned Name of Notary Public

INSTRUCTIONS:
1. One parent, legal guardian, or other responsible adult over 21 years of age must sign this form.
2. All signatures must be notarized or witnessed by an examiner.

HSMV 71022B (0706)