

Driving Safety Course or Motorcycle Operator Training Course Request Form

Instructions: With few exceptions, you have the right to complete a driving safety or motorcycle operator training course, as appropriate, if you are charged with an offense involving the operation of a motor vehicle. You do not have the right to complete a course if you hold a commercial driver's license, or if you held a commercial driver's license when the offense was committed, or if you are charged with passing a school bus, failing to stop and give information or render aid following an accident or on striking an unattended vehicle or fixture or highway landscape, or if you are charged with a traffic offense committed in a construction and maintenance work zone while workers were present, or if are charged with speeding 95 miles per hour or more, or if you were speeding 25 miles per hour or more over the posted speed limit. You must have a valid Texas driver's license or permit, or be a member of the United States military forces serving on active duty, or the spouse or dependent child of the member. You must have proof of financial responsibility (liability insurance). You may not take the course if you are taking the course at the time of this request, or if you have completed a course within the 12 months preceding the date of the offense.

In order to take an approved Driving Safety Course or Motorcycle Operator Training and Safety Program, you must elect and request to do so. You may complete this form and return it to the Court with a copy of your proof of liability insurance or other financial responsibility, and the payment of costs. This request must be received by the Court prior to the appearance date shown on your citation. If you intend to use the mail, you must use certified mail, return receipt requested, postmarked on or before the answer date on your citation. _____

You must pay court costs and fees as follows:

For offenses committed on or before 12-31-2007, in the amount of \$105.00;

For offenses committed after 12-31-2007, in the amount of \$110.00.

You may order your driving record through Texas Online, at <http://www.state.tx.us/>. You may also order your driving record from the Texas Department of Public Safety, at <http://www.txdps.state.tx.us/>, or by sending an Application for Copy of Driver Record, Form DR-1, to Driver Records Bureau, Texas Department of Public Safety, Box 149246, Austin, TX 78714-9246.

Do not take the course until you receive an Order from the court allowing you to do so.

Juveniles: A defendant who is younger than 17 years of age must appear in court with a parent, guardian, or managing conservator, to enter a plea and request to take a Driving Safety Course or Motorcycle Operator Training and Safety Program

IN THE JUSTICE COURT, PRECINCT _____ VICTORIA COUNTY, TX

Case No. _____ Ticket No. _____

The State Of Texas VS. _____

Offense: _____ Date Of Birth: _____

I plead **no contest** to an offense involving operation of a motor vehicle, and **I waive a trial by jury**. I request to take:

- a driving safety course a motorcycle operator training and safety program (choose one)
- I have a valid Texas driver's license, number _____
- I DO NOT hold a commercial driver's license
- I am not taking, and have not completed an approved driving safety course or motorcycle operator training course within the 12 months preceding the date of this offense.
- I am not charged with speeding 25 or more mph over the posted speed limit.
- I have attached proof of financial responsibility** as required by the Texas Motor Vehicle Safety Responsibility Act (Transportation Code Chapter 601).
- I have attached a cashier's check or money order in payment of the court costs and fees, in the amount of \$ _____.**
- I am a member of the United States military forces on active duty.
If applicable: Division of Armed Services: _____

Defendant's Signature

Date

Defendant Information

Driver's License No. _____ State: _____

Home Address: _____ City: _____ Zip _____

Home Phone: _____ Employer: _____ Work Phone: _____

Work Address: _____ City: _____ Zip _____

Nearest Relative: _____ Phone No.: _____