

New Driver: _____ **Date:** _____

Date	Vehicle Type	Maneuvers Practiced	Weather & Road Conditions	Night Hours	Day Hours	Prep Time	Actual Driving Time	Comments

*Note Parent / Guardian must log 50 hours with the new driver including 10-Hours at night.

	Prep Time	Actual Drive Time
Total for this page:		
Amount from Previous Drive Time:		
Total Hours:		