

# DRIVER'S ED SUMMER 2025

APPLICATION DUE: 5/29/25

LIMITED SPOTS, DON'T WAIT!

\*\* Must be 16 and have permit at time of signing up\*\*

CLASSES START: 7/1/25

CLASSES END: 7/31/25

WHERE: MEXICO HS ROOM \_tbd\_

COST: \$130

CASH OR CHECK

CHECK MADE PAYABLE TO:

MACS Treasurer

CONTACT MS. MORLEY WITH QUESTIONS

*[cmorley@mexicocsd.org](mailto:cmorley@mexicocsd.org)*

OR STOP DOWN TO STUDENT SERVICES



Marla Berlin  
Director of College and Career Education  
P: 315.963.4262  
[mberlin@Citiboces.org](mailto:mberlin@Citiboces.org)

## Summer 2025 Driver Education

Dear Parent/Guardian,

The CiTi BOCES' high school Driver Education program operates under the direction of the New York State Education Department and the New York State Department of Motor Vehicles. In order for students to successfully complete the program, our certified Driver Education teacher must provide and document a minimum of 24 hours of lectures and 24 hours of in-car experience.

You are being provided with a calendar of lectures and driving classes. Please note that these are required attendance dates. Students must accumulate 24 hours of classroom lectures and 24 hours of in-car experience in order to receive their MV-285 certificate. Any absences may prohibit their ability to successfully complete the program. **These requirements are strictly enforced by the State Education Department and NYS DMV.** All instruction is held at the student's home school.

If you would like to support your child's learning, you may refer to NYS DMV's "Pre-Licensing Course Student's Manual." This manual can be found at <https://dmv.ny.gov/forms/mv277.1.pdf> or you can contact Gloria Karboski at 315-963-4355 for a printed copy.

We are excited to support your child in developing their driving skills. Please contact me or your student's DE teacher with any questions.

Thank you and be well.

A handwritten signature in cursive script that reads "M Berlin".

Marla Berlin  
Director of College & Career Education  
[mberlin@citiboces.org](mailto:mberlin@citiboces.org)

For questions regarding:

Schedules, assignments, grades etc. - Contact the DE teacher  
MV-285 Certificates - Contact Gloria Karboski at [gkarboski@citiboces.org](mailto:gkarboski@citiboces.org) or 315-963-4355

## A BOARD OF COOPERATIVE EDUCATIONAL SERVICES

179 County Route 64, Mexico, NY 13114  
Christopher J. Todd, District Superintendent/Executive Officer



## Summer 2025 Driver Education Registration Form

**MUST HAVE TO START:** Completed Registration and Health Forms signed by Parent or Guardian;  
**LEGIBLE** Copy of License or Permit. Student MUST BE 16 years old by the first class  
and a high school student that has not graduated.

**Driver's License or Permit,**

# \_\_\_\_\_

**REQUIRED TO START**  
Copy must be provided at  
time of registration.

Student Last Name

First

MI

Phone No.

Age

DOB

M/F

Home School

Parent (s) Name (s) (Please print clearly)

Street address

City

Zip

Mailing address (if different than above)

Student E-mail address

**Grade in school for  
2025-2026:**

Senior \_\_\_\_\_

Junior \_\_\_\_\_

Other \_\_\_\_\_

**Does student have  
an IEP or 504?**

Yes \_\_\_\_\_ No \_\_\_\_\_  
(If so, attach copy)

I, \_\_\_\_\_, acknowledge that I am required to attend 24 hours of  
Print Student Name

classroom lectures in person and 24 hours of in-car instruction in accordance with the schedule I have received.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

### PARENT/GUARDIAN PERMISSION

I have been notified of the course and its requirements (24 hours of lecture & 24 hours in-car instruction) and give permission for my son/daughter:

\_\_\_\_\_  
(Student name)

to participate in the Driver Education Program delivered by CiTi BOCES.

Parent or Guardian Signature

Date

I also give permission for my child to be videotaped, photographed and/or interviewed for strictly educational or public relations purposes.

\_\_\_\_\_  
(Do not sign if you do not give permission.)



**Driver Education**  
Health & Emergency Information

Dear Parent,

We will need current information on all health records if we are going to deal effectively with any emergency that might arise involving your child during the Driver Education Course. Please complete the following form.

Student Name

Present Address

Parent(s)/Guardian(s)

Home phone #

Work and/or cell #

Work and/or cell #

Please answer the following questions in as much detail as possible:

1. Does the student have any medical condition that the school nurse and/or DE teacher should know about?  
(For example: diabetes, asthma, epilepsy, etc.) Please explain:

\_\_\_\_\_

\_\_\_\_\_

2. Does student have any known allergies? (For example: bee stings, medication, etc.) Please explain:

\_\_\_\_\_

3. Is student currently on medication or will he/she be at the time school or Driver Ed is in session? Please give instructions for dosage and describe restrictions if any.

\_\_\_\_\_

**\*Note: If student needs medication during school and/or Driver Ed hours, New York State Law requires written authorization from both parent and physician.**

If we are unable to locate you in the event of an emergency, please list the name of two individuals living in or near your home that we may contact for assistance:

Name, Address, & Phone #

Relationship to Student

Name, Address, & Phone #

Relationship to Student

Physician to be called: \_\_\_\_\_ Phone # \_\_\_\_\_

Dentist to be called: \_\_\_\_\_ Phone # \_\_\_\_\_

In the event of an extreme emergency and we are unable to contact the above individuals, we will contact the nearest medical assistance available. Please sign this sheet as your consent to these emergency procedures.

Parent/Guardian Signature

Date

# July 2025

MEX Summer Driver Ed

George Emrich  
whsathletics18@gmail.com

SUN	MON	TUE	WED	THU	FRI	SAT
Group A 8-9:30 Group B 9:30-11 LECTURE 11-12:30		1 DE	2 DE	3	4	5
6 Group C 1-2:30 Group D 2:30-4 Group E 4-5:30	7 DE	8 DE	9 DE	10 DE	11	12
13 Make-Ups Are Limited. Do Not Miss Class!	14 DE	15 DE	16 DE	17 DE	18	19
20	21 DE	22 DE	23	24	25	26
27	28 DE	29 DE	30 DE	31 DE		