## Beginning Driver Experience Log

Must be completed prior to drive test appointment

| Applicants Name | Instruction Permit or Restricted License No. |
|-----------------|--|

- This log, and any additional sheets, must be completed in blue or black ink.
- No pencil or colored gel pens will be accepted
- Logs completed using military time will not be accepted.

Please enter the date, start time/ end time, to include AM or PM. Enter the number of minutes during each drive session on a separate line.

| each drive session on a separate line.  Column A- Daytime Driving |   |         |         | Column B – Nighttime Driving            |   |                  |         |
|---|---|---------|---------|---|---|------------------|---------|
| Date  | Time of Day Please indicate AM or PM Do not use military time |         | Minutes | Date                                    | Time of Day Please indicate AM or PM Do not use military time |                  | Minutes |
|   | Begin   | End     |         |   | Begin   | End              |         |
| 01/17/23<br>EXAMPLE   | 6:00 am   | 8:00 am | 120     | 01/17/23<br>EXAMPLE                     | 8:00 pm   | 9:00 pm          | 60      |
|   |   |         |         |   |   |                  |         |
|   |   |         |         |   |   |                  |         |
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|   |   |         |         |   |   |                  |         |
|   |   |         |         |   |   | ubtotal Column B |         |
|   |   |         |         | Subtotal Column A                       |   |                  |         |
|   |   |         |         | Minutes Subtotal from Additional Sheets |   |                  |         |
|   |   |         |         |   |   | Total Minutes    |         |
|   |   |         |         | Total F                                 | /   |                  |         |
| Subtotal Column A Minutes Grand Total Minutes/Hours               |   |         |         |   | /   |                  |         |