



# FRONT SEAT PASSENGER-IN-CAR INSTRUCTION FOR BIOPTICS LOG SHEET

Bureau of Driver Licensing • P.O. Box 68682 • Harrisburg, PA 17106-8682  
(717) 787-9662 • [medical@pa.gov](mailto:medical@pa.gov)

## INSTRUCTIONS:

1. Complete in blue or black ink.
2. Completed hours/minutes must be entered on the approved log(s). Multiple logs may be completed and attached, if necessary.
3. Must have ten (10) hours of front seat passenger-in-car instruction while wearing a bioptic telescope by a low-vision rehabilitation professional.
4. Must present completed log(s) upon application for bioptic learner's permit.

A CUSTOMER INFORMATION			
NAME	DATE OF BIRTH	TELEPHONE NUMBER	
STREET ADDRESS:			
CITY	STATE	ZIP	
E-MAIL:			

Date	Drive Time - Hours/Minutes		Date	Drive Time - Hours/Minutes

B AFFIRMATION AND SIGNATURE			
I certify that the individual named above has completed ten (10) hours of front seat passenger-in-car instruction while wearing a bioptic telescope.			
Signature of Low Vision Rehabilitation Professional	Printed Name	LVRP Number	Date
Signature of Applicant		Date	