### Course Information

<table>
<thead>
<tr>
<th>Prefix / Number:</th>
<th>SEF 3001</th>
<th>Course Title:</th>
<th>Defensive Driving/DD4</th>
<th>Contract #:</th>
<th>K</th>
</tr>
</thead>
<tbody>
<tr>
<td>Begin – End Date:</td>
<td>Location:</td>
<td>Registration Fee:</td>
<td>$ 60.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Begin – End Time:</td>
<td>Instructor:</td>
<td>Revenue Code:</td>
<td>CESOC</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Personal Information

<table>
<thead>
<tr>
<th>Social Security Number</th>
<th>Last Name</th>
<th>First Name</th>
<th>Mid Initial</th>
</tr>
</thead>
</table>

#### Have you ever attended SCC under another name? If so, please list below:

**County in which violation occurred:**

### Contact Information

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>County</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date of Birth</th>
<th>Phone Number- Day</th>
<th>Phone Number- Night</th>
<th>E-Mail Address</th>
</tr>
</thead>
</table>

### Gender and Employment

- Male
- Female

- Unemployed
- Employed Part Time
- Employed Full Time
- Retired
- Employer:

- White – Non-Hispanic Origin
- Black – Non Hispanic Origin
- Asian or Pacific Islander
- Hispanic
- American Indian or Alaskan Native

### NC Resident

- Yes
- No

### Education

Circle Highest Grade Completed

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- or GED

### How did you hear about the course?

- Published Schedule
- Web Page
- Brochure
- Newspaper
- Radio
- Friend or Associate
- Employer
- Instructor
- Other ________________________________

### Payment Information

- Paid cash $ __________________

### CDL

- Yes
- No

### Driver's License Information

- Drivers License Number- ____________________________ State- __________

### Citation Information

- Citation Number/Violation- ____________________________ Court Date: __________

### Additional Instructions

IF YOU ARE UNDER the age of 18, YOU MUST HAVE AN UNDERAGE FORM, or you will not be allowed to attend class. No exceptions.

Student Signature / Date: ____________________________

SCC Representative Signature / Date: ____________________________