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WASHINGTON STATE DEPARTMENT OF LICENSING

Driver Training School Certified Examiner Training Log

Driver training schools use this form to maintain a record of who attended Certified Training sessions. Keep for your records.

School location			
Master Examiner name	(Area code) phone number	Dates of training	Times of training

Instructor name	License #	Pre-req modules verif	Class-room modules compl.	Observ. drive #1	Observ. drive #2	Observ. drive #3	Observ. drive #4	Observ. drive #5	Observ. drive #6	Observ. drive #7	Observ. drive #8	Scoring drive #1	Scoring drive #2	Scoring drive #3	Scoring drive #4	Final practice drive
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X When you have completed this form, please print it out and sign here.

Master Examiner signature Date

DTS-661-031 (N/11/14)WA