SUPERVISED DRIVING LOG

LOG YOUR DRIVES ON THE BELOW FORM
OR DOWNLOAD THE FREE MOBILE APP

RoadReady®

Date	Location of Practice (ex. rural, highway)	Day/Night	Weather	Skills practiced	Driving time	Adult's Initials
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I hereby affirm that I am the parent/guardian who has supervised my teen driver for the majority of the required driving hours, and that my teen has driven the hours listed above.

Signature

Date

Total driving hours:

Day

Night