Driving Safety Course (**DSC**):

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| --- | --- |
| You CAN take DSC if: | You CANNOT opt DSC if your citation is for: |
| 1. The driver must hold a valid Class C non-commercial Texas driver’s license or Active Military and immediate family with out of State License/or permit may be eligible;
2. The driver must not have taken a driving safety course to dispose of a traffic offense within the previous 12 months;
3. The driver must not be currently taking a driving safety course to dispose of another offense in any other court;
4. The request for DSC must be made on or before the appearance date on the ticket - The driver must plead “guilty” or “nolo contendere” (no contest);
 | 1. Speeding 25 or more miles per hour over the posted speed limit;
2. A speed of 95 MPH or greater;
3. Construction or maintenance work zone violations (when workers are present);
4. Failure to stop at the scene of an accident;
5. Failure to give information or render aid;
6. Reckless driving;
7. Overtaking a school bus;
8. Fleeing police;
9. Offenses committed by a driver holding a Commercial Driver’s License (CDL)
10. The driver must have valid auto liability insurance;
 |

**The court must receive ALL the required documents listed below before the court can grant your DSC request.  You must submit:**

1. A printed copy of your current Texas Driver License (or current military information if not a Texas resident),
2. A printed copy of your insurance,
3. The notarized affidavit located in the inside of the yellow pamphlet,

A cashier's check or money order made payable to JP#1 for the court cost for DSC of $144.00-$169.00 ($169.00 is for offenses that occurred in a school zone or construction zone WITHOUT workers present).

**DRIVING SAFETY COURSE REQUEST**

**MAIL TO: Mail to: Justice of the Peace Pct. 1, Kendall County 201 E. San Antonio Ave, #20A**

**Boerne Texas 78006**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Citation Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby enter my appearance, waive my right to a jury trial, enter a plea of **No Contest** and request to take a driving safety course. I have not completed a driving safety course within 12 months preceding this violation.

**I understand that I must present to the court the following with this request**:

 1) A valid Texas Driver’s license or permit; ***Submit copy***

 2) Proof of financial responsibility (vehicle insurance); ***Submit copy***

 3) Pay court costs and administrative fee totaling ***$144.00*** *OR* if the offense occurred in

 a school zone ***$169.00***

**I understand that after receiving my approval letter by the court, I must:**

1) Complete an approved driving safety course within 90 days of this request;

2) Submit by the 90th day of this request a uniform certificate of course completion of the

driving safety course or motorcycle operator course;

3) Submit by the 90th day of this request a certified copy of my driver’s record from DPS;

**I understand that:**

1) If I comply with the orders listed above, the charge against me will be dismissed and the

court will report to DPS the completion date of the driving safety course for inclusion on

my driving record;

2) If I fail to comply with any or all orders, the court will require my appearance at a show

cause hearing, and the maximum fine of $200.00 may be assessed. Failure to appear or

pay the fine may result in a warrant being issued.

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**A F F I D A V I T**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DO SOLEMNLY SWEAR AND STATE UNDER OATH THAT: I am not in the process of taking a driving safety course under Section 45.0511, Code of Criminal Procedure, nor have I completed a course under that section that is not yet reflected on my driver’s record as maintained by the Texas Department of Public Safety.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Defendant’s Signature Date: