

Drive Log Template

Parent-Student On-Road Driver Training

Idaho Code Section 49-307 allows for students who live in a rural district or a district that does not have a Driver Education course to receive behind the wheel training from their parents. This allows students to complete the equivalent training as those in a traditional driver education course. The minimum requirements for this training are:

- Thirty (30) hours of classroom instruction
- Twelve (12) hours of behind-the-wheel instruction*
- Submit a classroom instruction transcript to the county driver's license office
- Submit driving log to the county driver's license office

Following this training, students must complete a supervised instruction permit period that includes:

- Fifty (50) hours total of supervised driving over a period of no less than six (6) months
 - Ten (10) hours of which shall be driving during hours of darkness

[You can find more information about the law here.](#)

The below log contains content standards to help you and your student follow along with their classroom lessons. As your student works on becoming a fantastic driver, please fill out the date, time, location, and skills practiced for each behind the wheel session. If you have any questions, please contact Benjamin Puga at the Idaho Department of Education at bpuga@sde.idaho.gov or 208-332-6984.

Student Name	
Student Permit #	
Parent/Guardian Name(s)	

*These hours must be logged with DMV approved parent/guardian(s). If logged with an unapproved parent/guardian, those hours will not be included.

Content	Skills Practiced	Date	Drive Time (hours)	Location	Day/Night	Adult's Signature and DL #
<input type="checkbox"/> Vehicle Awareness	<ul style="list-style-type: none"> • Identifying Gauges and Warning Symbols Inside a Vehicle • Operating Vehicle Control Devices • Preparing to Drive • Protecting Occupants 				<input type="checkbox"/> Day <input type="checkbox"/> Night	
<input type="checkbox"/> Traffic Control	<ul style="list-style-type: none"> • Traffic Control Devices and Laws • Right of Way Rules 				<input type="checkbox"/> Day <input type="checkbox"/> Night	
Hours	Total: __/12					

Content	Skills Practiced	Date	Drive Time (hours)	Location	Day/Night	Adult's Signature and DL #
<input type="checkbox"/> Vehicle Control	<ul style="list-style-type: none"> • Vehicle Positioning • Performing Basic Control • Lane Changes and Passing • Performing Turnabouts • Parking Maneuvers 				<input type="checkbox"/> Day <input type="checkbox"/> Night	
<input type="checkbox"/> Controlling The Area Around Your Vehicle	<ul style="list-style-type: none"> • Using Vision for Vehicle Control • Time and Space Management Systems and Strategies • Intersections 				<input type="checkbox"/> Day <input type="checkbox"/> Night	
<input type="checkbox"/> The Physics of Driving	<ul style="list-style-type: none"> • The Effects of Gravity and Energy of Motion on a Vehicle • Negotiating Hills and Curves 				<input type="checkbox"/> Day <input type="checkbox"/> Night	
Hours			Total: __/12			

Content	Skills Practiced	Date	Drive Time (hours)	Location	Day/Night	Adult's Signature and DL #
<input type="checkbox"/> Driving Environments	<ul style="list-style-type: none"> • Rural Driving • Urban Driving • Driving on Limited Access Highways (Freeways) • Driving at Night and in Other Reduced Visibility Conditions • Driving During Adverse Weather Conditions 				<input type="checkbox"/> Day <input type="checkbox"/> Night	
<input type="checkbox"/> Cooperating with Other Roadway Users	<ul style="list-style-type: none"> • Driving Within the Highway Transportation System • Responding to Emergencies • Responsibilities after a Crash 				<input type="checkbox"/> Day <input type="checkbox"/> Night	
Hours	Total: __/12					

Content	Skills Practiced	Date	Drive Time (hours)	Location	Day/Night	Adult's Signature and DL #
<input type="checkbox"/> Being a Responsible Driver	<ul style="list-style-type: none"> • Effects of Emotions on Driving • Disabilities and Driving • Alcohol and Drugs • Alcohol/Drug Involved Crashes and Idaho Law • Drowsy Driving • Aggressive Driving • Districted Driving 				<input type="checkbox"/> Day <input type="checkbox"/> Night	
					<input type="checkbox"/> Day <input type="checkbox"/> Night	
					<input type="checkbox"/> Day <input type="checkbox"/> Night	
					<input type="checkbox"/> Day <input type="checkbox"/> Night	
					<input type="checkbox"/> Day <input type="checkbox"/> Night	
Hours	Total: __/12					

Content/Skills Practiced	Date	Drive Time (hours)	Location	Day/Night	Adult's Signature and DL #
				<input type="checkbox"/> Day <input type="checkbox"/> Night	
				<input type="checkbox"/> Day <input type="checkbox"/> Night	
				<input type="checkbox"/> Day <input type="checkbox"/> Night	
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				<input type="checkbox"/> Day <input type="checkbox"/> Night	
				<input type="checkbox"/> Day <input type="checkbox"/> Night	
Hours	Total: __/12				

Content/Skills Practiced	Date	Drive Time (hours)	Location	Day/Night	Adult's Signature and DL #
				<input type="checkbox"/> Day <input type="checkbox"/> Night	
				<input type="checkbox"/> Day <input type="checkbox"/> Night	
				<input type="checkbox"/> Day <input type="checkbox"/> Night	
				<input type="checkbox"/> Day <input type="checkbox"/> Night	
				<input type="checkbox"/> Day <input type="checkbox"/> Night	
Hours	Total: __/12				

I certify and endorse that the above record is true and correct and my student has completed 12 hours of guided practice which includes at least 6 hours of behind-the wheel instruction and 6 hours of in-vehicle observation.

Parent Signature	
Date	