

Michigan Department of State
Licensing Unit
Lansing, MI 48918

Classroom Approval/Fire Marshal Verification

Driver Education Provider _____

Certification Number P _____

School Owner or Coordinator _____

Telephone (_____) _____

Instructions: Complete Part A or Part B of this form based on the location of the classroom. Completed forms should be mailed to the Department of State's Licensing Unit (address above) or faxed to (517) 335-2810. **You may not begin using a classroom location until it has been approved.** Approval can be verified by checking the department's Web site (www.Michigan.gov/teendriver); click on (Teen Driver Quick Links bullet) Find a Driver Education Program, then [Driver Education Classrooms](#). No approval notice will be mailed; all approved classroom locations are listed on the Web site. If your school's new classroom location is not listed after three weeks, contact Licensing@michigan.gov to check on the status.

Type of classes to be offered at location (check all that apply):
 Segment 1 Adult
 Segment 2 Truck

If Segment 1 classes will be held at this location, a [Behind-the-Wheel \(BTW\) Route Outline](#) form of the driving lessons are required, which must conform to the prescribed curriculum (Section 5B of the Driver Education Curriculum Guide).

PART A: Complete this part if the classroom site is located in a recognized educational institution (i.e., public, private, or parochial school building). A Classroom Approval/Fire Marshal Verification form must be completed for each classroom location.

This shall serve notice to the Department of State that _____ (educational institution / school district)	
has entered into an agreement with the above named driver education provider, to make a room available in _____ (building name)	
located at _____ (street address, city and zip code)	
for the purpose of conducting a driver education course. The room meets state and local building code and public occupancy requirements.	
_____ Authorized Educational Institution Official (Print)	(_____) _____ Telephone Number
_____ Signature	_____ Date

PART B: Complete this part if the classroom site is located in a non-educational institution (i.e., private business address, church building, etc.). A Classroom Approval/Fire Marshal Verification form must be completed for each classroom location.

_____ of the _____ has inspected the potential (Inspector's name) (fire department)		
driver education classroom, located at _____ (building name, street address, including room number, city and zip code)		
for the above named driver education provider. The classroom meets state and local building code and public occupancy requirements, and is approved for classes of not more than _____ students. (number of students)		
_____ Inspector's Signature	(_____) _____ Telephone Number	_____ Date

Note: When classroom instruction is given, class size shall not exceed 36 students or the number of students allowed by the fire marshal, whichever is less.