



# DRIVER EDUCATION MATERIALS REQUEST

This form may **ONLY** be used by certified driver education providers. **Please fill in all requested information.** Orders without a valid provider certificate number will not be processed. All orders are shipped via UPS and delivered only to the provider's business physical address. UPS requires a signature when delivering shipments. If no one is available to accept delivery, it is your responsibility to pick up the shipment at your local UPS office.

**The form can be faxed (517-316-1621) or emailed (SOSInvControl@michigan.gov) to the Inventory Services Section.**

PART A – PROVIDER INFORMATION				
Name of Provider			Provider Certificate Number <b>P</b>	
Business Physical Address (Street, City, Zip Code, and County)				
Name of Authorized Provider's Program Official			Phone No.	
PART B – DRIVER EDUCATION MATERIAL INFORMATION				
# OF UNITS	FORM NAME	FORM #	REQUEST LIMITS	REQUEST OF 1 UNIT =
	Driving Tips to Help You Safely Share the Road with Motorcyclists	SOS-118	2 Units	100 / package
	What Every Driver Must Know (WEDMK)	SOS-133	10 Units	50 / box
	Applying for a License or ID?	SOS-428	2 Units	250 / package
	Michigan Commercial Driver License Manual	TS-004	2 Units	38 / box
PART C – CERTIFICATION				
<ul style="list-style-type: none"> <li>With knowledge of the penalties for false statements under, but not limited to, Section 69 of the Driver Education Provider and Instructor Act [MCL 256.689, PA 384 of 2006], I/we certify that the statements and information contained within this form are true to the best of my/our knowledge and belief.</li> </ul>				
Printed Name of Authorized Provider's Official			Title	
Signature of Authorized Provider's Official			Date Signed	