

COMPLETION CERTIFICATE DATA LOG

This log is required to be submitted to the Michigan Department of State each month the training is provided.

Michigan Department of State - Michigan Rider Education Program (Mi-REP)

Phone: (517) 241-6850 Fax: (517) 373-0964 E-mail: motorcycling@michigan.gov

RERP # _____ Sponsor _____ Class Location _____

Dates ___/___/___ to ___/___/___ TYPE: BRC / RRC / ARC / 3WBRC _____ Course Federally Funded? YES / NO _____

RiderCoach _____ RiderCoach _____

Status:	R (registered) – signed up prior to start of class, W (walk in) - showed up on the first day of class
eCourse:	CC (completion certificate student presented), or AR (additional resource, eCourse code provided to student upon successful completion of 5 x 5 x 10 BRC)
Final:	Pass – (pass) successful on all tests, Inc. - (incomplete) did not complete course, Fail – (failed) one or multiple tests, or NS – (no show) never showed up
Vest:	Reg (regular), XL (large), D (declined), and N/A – (private sponsor)

#	Status	Applicant Name	Date of Birth	Driver License Number	Certificate	eCourse	Final	Vest
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	Pass	Fail	Inc.	NS	Total
Class					
FYTD					