



MINNESOTA DEPARTMENT OF PUBLIC SAFETY
DRIVER AND VEHICLE SERVICES

APPLICATION TO ADMINISTER WEB-BASED CLASS D KNOWLEDGE TEST

| | | | | |
|---|---|--------------|------------------------------|----------|
| Name of Entity | | | Tax Identification Number | |
| Address of Administrative Office | | City | State | Zip Code |
| Mailing Address (if different) | | City | State | Zip Code |
| Administrator's Name | | Phone Number | Email Address | |
| Location of Web-Based Knowledge Test Administration | | | City | |
| Size of Space (square footage) | Number of Computers Available for Testing | | Static IP Address (Required) | |

| | | |
|---------------------|--------------|---------------|
| Hours of Operation: | Days of Week | Testing Hours |
|---------------------|--------------|---------------|

| | | | |
|----------------------|---------------|--------------|-----------------------------------|
| Full Name of Proctor | Email Address | Phone Number | Minnesota Driver's License Number |
| Full Name of Proctor | Email Address | Phone Number | Minnesota Driver's License Number |
| Full Name of Proctor | Email Address | Phone Number | Minnesota Driver's License Number |
| Full Name of Proctor | Email Address | Phone Number | Minnesota Driver's License Number |

| | |
|----------------------------|------|
| Administrator's Signature: | Date |
|----------------------------|------|

Mail to Driver and Vehicle Services, 445 Minnesota Street, Suite 176, St. Paul, Minnesota 55101-5176,
or Email to driver.education@state.mn.us, or Fax to (651) 296-5316

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| For office use only: Date processed: _____ Approved by: _____ |
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