	SE NO ENSE:
STATE OF TEXAS	§ IN THE JUSTICE COURT
v.	§ PRECINCT 1, PLACE 1
 Defendant	§ DALLAS COUNTY, TEXAS §
	-
	REQUEST FOR A DRIVING SAFETY COURSE (DSC) of LE OPERATOR TRAINING COURSE (MOTC)
I hereby enter my appearance on t	mplaint of the above-named offense.

## Check One:

I hereby waive my right to a jury trial, plead  $\square$  guilty /  $\square$  no contest, and elect to take a driving safety course or motorcycle operator training course.

\_\_\_\_\_ (initial) I understand that I must present to the Court the following with this request.

- 1. A **valid Texas driver license or permit**, or proof that I am a member, or the spouse or dependent child of a member, of the United States military forces serving on active duty;
- 2. **Proof of financial responsibility** (proof of liability insurance in my name);
- 3. **Payment of** court costs  $\frac{$0.00}{}$  including a  $\frac{$10.00}{}$  nonrefundable court fee <u>plus</u> a \$2 transaction fee.

## \_ (initial) I understand that I must:

- 1. **Complete** a driving safety course/motorcycle operation training course (DSC/MOTC) within 90 days;
- 2. **Submit** *on or before the 90th day* <u>a</u> <u>certificate</u> <u>completion</u> of a DSC or MOTC as evidence that I have satisfactorily completed such a course;
- 3. **Submit on or before the 90th day** an affidavit that I have not completed a DSC or MOTC within the preceding 12 months from the date of this offense as shown on my driving record as maintained by the Texas Department of Public (DPS); and,
- 4. **Submit on or before the 90th day** a certified copy of my driving record as maintained by the DPS.

## \_\_ (initial) I understand that:

- 1. **If I comply** with the court order granting the taking of a DSC/MOTC and submit all the required evidence as ordered, the Court will dismiss my case and report to the DPS the date that I completed my course for inclusion on my driving record;
- 2. **If I <u>fail</u> to submit** all the evidence required by the Court, I will be notified of a show cause hearing and be required to appear before the Court to show cause why I did not present the required evidence of course completion;
- 3. **The judge** *may* at the show cause hearing enter a final adjudication against me and require me to pay the fine; and,
- 4. The <u>failure to appear</u> at the show cause hearing will result in a final adjudication being entered against me and that I will be required to pay the fine and any additional costs required by law.

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	ATTEST THAT	I HAVE KEAD	& UNDERSTA	ND I HIS L	OCUIVIENT

Defendant's Signature	Date	
Defendant's Attorney (if applicable)	Date	
Bar No.		

OFFENSE:		
<u> </u>		
STATE OF TEXAS	§ IN THE .	JUSTICE COURT
V.		t 1, Place 1
		COUNTY, TEXAS
DEFENDANT'S PLEA & REQUEST FO MOTORCYCLE OPERATO		
I, Glenn Edward Reavis, state under oath	that on the date	of my request for a driving safety
course/motorcycle operator training course (DSC)	/MOTC) in the abov	ve numbered cause that I was not
taking such a course nor had I completed one w	ithin the 12 months	preceding the <u>date</u> of my current
offense (August 15, 2015) that is not shown on my	driving record as m	aintained by the Texas Department
of Public Safety (or as maintained by the state	that issued my dri	ver's license - active military duty
personnel only).	,	
personner omy).		
Defendant's Signature	PRINT Name (Def	endant)
Address Apt. #	PRINT Name (Def  City State Zip	endant) 
		endant)    Email
Address Apt. # xxx-xx-	City State Zip  Phone Number	·
Address Apt. #  XXX-XX-  DL/ID# (last 4 digits) SS # (last 4 digits)	City State Zip  Phone Number	·
Address Apt. #	City State Zip  Phone Number  nority, on	Email
Address Apt. #	City State Zip  Phone Number  nority, on	<i>Email</i> ourt
Address Apt. #    XXX-XX-    DL/ID# (last 4 digits)   SS # (last 4 digits)  Sworn and subscribed before me, the undersigned auth  [ SEAL ]	City State Zip  Phone Number  nority, on  Clerk of the C  Justice of the	Email  Ourt Peace, Precinct 1, Place 1
Address Apt. #  XXX-XX-  DL/ID# (last 4 digits)  Sworn and subscribed before me, the undersigned auth  [ SEAL ]  OR	City State Zip  Phone Number  Clerk of the C  Justice of the	ourt Peace, Precinct 1, Place 1  e and correct.  th is:
Address Apt. #    XXX-XX-    DL/ID# (last 4 digits)   SS # (last 4 digits)  Sworn and subscribed before me, the undersigned auth  [ SEAL ]    OR   Declaration   I declare under penalty of perjury tha     My name is	City State Zip  Phone Number  Clerk of the C  Justice of the	Email  ourt Peace, Precinct 1, Place 1  e and correct.
Address Apt. #    XXX-XX-    DL/ID# (last 4 digits)   SS # (last 4 digits)  Sworn and subscribed before me, the undersigned auth  [ SEAL ]  OR  Declaration   I declare under penalty of perjury tha	City State Zip  Phone Number  Clerk of the C  Justice of the  t the foregoing is tru  My date of bir	e and correct.  Month/Day/Year
Address Apt. #	City State Zip  Phone Number  Clerk of the C  Justice of the  t the foregoing is tru  My date of bir	e and correct.  Month/Day/Year  Country