

SAUK VALLEY COMMUNITY COLLEGE TRAFFIC SAFETY PROGRAM REGISTRATION FORM

This form also requires that you plead guilty and request supervision, online.
When complete, e-mail this form to circuitclerk@oglecountyil.gov.

If you have a CDL, DO NOT submit this registration form.

Call Sauk Valley Community College at 815.835.6365.

First Name: _____ Middle Initial: _____ Last Name: _____
Address: _____ Apt. No.: _____ City & State: _____ Zip Code: _____
Date of Birth: (mm/dd/yyyy) _____ ☐ I am 21 or older
Driver's License Number: _____ Driver's License State: _____
Phone Number: _____
Alternate Phone Number: _____
Email Address: _____
Date of Ticket: (mm/dd/yyyy) _____ Ticket No.: _____

Class Options

☐ \$55 - 4-hour In-person Classes

Select your choice in order of preference (1, 2, 3)

_____ Weekday Evening

_____ Saturday Morning

_____ Saturday Afternoon

4-hour Class Location

Select the most convenient:

☐ SVCC Campus: Dixon

☐ Savanna

☐ Polo

☐ Freeport

☐ \$75 Online (must be 21 years of age - online course will take between 4 - 6 hours with a test)

☐ Other Location/Provider Contact SVCC Traffic Safety Program for more information

☐ I require a sign language interpreter

Your class assignment will be mailed and emailed from Sauk Valley Community College 60-90 days after fines/fees are paid.

FOR OFFICE USE ONLY

CASE NUMBER: _____