



Syracuse Youth Court Traffic School

Youth Name: _____

SYC#: _____

You have been assigned to attend Syracuse Youth Court Traffic School. This class will be held on the date and time listed on your Disposition Contract and will last for about one hour. The class is held at the Syracuse City Building (1979 West 1900 South). A parent/guardian does not need to attend with you. This class must be completed before your return hearing.

Please give this form to the Traffic School instructor. The instructor will complete this form and return it to the Youth Court for your return hearing.

To be completed by the Traffic School instructor:

1. Arrived on time to class? Yes / No
2. Participated in class? Yes / No
3. Successfully completed safety school? Yes / No
4. Any additional comments?



Date: _____

Traffic School Instructor Name: _____

Traffic School Instructor Signature: _____