



REGISTRY OF MOTOR VEHICLES

# Monthly Required 7D Training Report for School Pupil (7D) Temporary Waiver

Registry of Motor Vehicles

PO Box 55889 · Boston, MA 02205-5889 · Email: [Schoolbus7dnotify@dot.state.ma.us](mailto:Schoolbus7dnotify@dot.state.ma.us)

## Instructions

Complete this form for each driver for the required additional two (2) hours of monthly training as prescribed by the RMV (September to June) in addition to the regular eight hours of in-service training.

Submit completed forms by email to [Schoolbus7dnotify@dot.state.ma.us](mailto:Schoolbus7dnotify@dot.state.ma.us).

## Company Information

Company Name

Contact Person Name

Phone Number

Company Address

## Training Information

Training date(s)

Curriculum topic

Attendee Signature

Attendee Print Name

Instructor/Trainee Signature

Instructor/Trainee Name

Training date(s)

Curriculum topic

Attendee Signature

Attendee Print Name

Instructor/Trainee Signature

Instructor/Trainee Name

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