



Maxwell Motorsports & Driving School

Agricenter International - 7777 Walnut Grove Rd. - Wing C - Memphis, TN 38120
(901) 755-6777
www.maxwelldriving.com

Differential Driving Training Program Application & Intake Form

Please Print

Student's Legal Name (first, middle, last) _____

€ Male Birthdate (mm/dd/yyyy): _____ / _____ / _____ Age: _____

€ Female School/Program (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Student Phone Number: (____) _____ - _____ SSN: _____ - _____ - _____

Student Email: _____ @ _____

Parent/Guardian 1

Name: _____

Email: _____ @ _____

Phone Number: (____) _____ - _____

Work Number: (____) _____ - _____

Parent/Guardian 2

Name: _____

Email: _____ @ _____

Phone Number: (____) _____ - _____

Work Number: (____) _____ - _____

Check all that apply:

- ☐ Autism Spectrum Disorder ☐ Anxiety
☐ Learning Disability ☐ ADHD
☐ Vision Impairment ☐ Hearing Impairment
☐ Mobility Impairment ☐ Other: _____
☐ None Please explain: _____

Emergency Contact (Other than Parent):

Name: _____

Phone Number: (____) _____ - _____

Estimated Driving Experience (in hours):

€ No Experience

Parking Lots: ☐ 0 ☐ 1+ ☐ 5+ ☐ 10+ ☐ 25+ ☐ 50+

Residential Streets: ☐ 0 ☐ 1+ ☐ 5+ ☐ 10+ ☐ 25+ ☐ 50+

City Streets: ☐ 0 ☐ 1+ ☐ 5+ ☐ 10+ ☐ 25+ ☐ 50+

Rural Roads: ☐ 0 ☐ 1+ ☐ 5+ ☐ 10+ ☐ 25+ ☐ 50+

Interstate/Highway: ☐ 0 ☐ 1+ ☐ 5+ ☐ 10+ ☐ 25+ ☐ 50+

Locations & Conditions (Check all that apply)

- ☐ On major streets (e.g., Poplar Ave, Walnut Grove, Germantown Pkwy) ☐ In rainy weather ☐ Parking Spaces
☐ In heavy traffic ☐ At night ☐ Parallel Parking



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If applicable, describe any diagnoses, IEPs, 504 plans, or accommodations currently in place:

Are there medical interventions that may be needed during instruction?

Communication & Learning Preferences

How does your child learn best? (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Verbal instructions | <input type="checkbox"/> Step-by-step guidance |
| <input type="checkbox"/> Written directions | <input type="checkbox"/> Repetition and consistency |
| <input type="checkbox"/> Visual aids (charts, pictures) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Hands-on practice | |

How can we accommodate your child's communication and learning style?

Does your child have any sensory sensitivities or triggers (e.g., noise, lights, fabrics)?

No / Yes Please describe: _____

Social & Emotional Awareness

On a scale of 0-10 (0 = Never or Not Likely, 10 = Always or Very Likely), please rate your child in the following areas and provide examples where helpful:

1. Judgement & Maturity

How often does your child show good judgement and maturity...

At school or work: _____ With peers: _____ At home: _____

Notes or Examples:



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2. Feedback & Redirection Response

How well does your child respond to constructive feedback or correction? (0-10) _____

What approaches work best when offering feedback? (e.g., gentle tone, time to process):

3. Impulse Control

How well does your child manage impulses (e.g., blurting out, reacting without thinking)? (0-10) _____

What helps your child stay calm or self-regulate in situations where patience or delayed response is needed?

4. Frustration

How well does your child handle frustration, disappointment, or making mistakes? (0-10) _____

Common triggers / Helpful strategies:

5. Problem-Solving & Conflict Resolution

When presented with a challenge, how likely is your child to pause and think through options before acting? (0-10) _____

Describe how your child typically responds in high-stress or unexpected situations:



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Driving-Specific Considerations

Has your child had any previous driving or behind-the-wheel experience?

No / Yes Please describe: _____

Check all that apply:

- | | |
|---|---------------------------------|
| € Difficulty with attention/focus | € Challenges with multitasking |
| € Coordination or motor planning issues | € Easily overwhelmed in traffic |
| € High anxiety in new environments | € Sensory overload in vehicles |
| € Trouble processing verbal instruction quickly | € Other: _____ |
| € Difficulty judging speed/distance | |

Strengths or qualities that may help with learning to drive:

Instructional Support & Goals

What are your goals for your child in this program?

- | | |
|-------------------------------------|--|
| € Learn basic driving skills | € Prepare for the driving test |
| € Build confidence behind the wheel | € Learn coping strategies for driving-related stress |
| € Develop safe driving habits | € Other: _____ |
| € Reduce anxiety related to driving | |

Are there any tools, accommodations, or supports that work well for your child?

Is there anything we should avoid or handle with special care?

Is there anything else we should know to support your child's success?
