## QUICK REFERENCE GUIDE: Select Desired Credential

Select desired credential from dropdown menu.

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. Enter y	our personal	inform	ation									
*First	First Name					(xxx-xxx-	'Main	Ex. 260-4	44-444	4		
Middle	Middle Name						Alt	Alternate	Phone			
*Last	LastName					-						
Last	Lastrianie					E	:-Mail	E-Mail Ad	dress			
Suffix	Suffix											
	Addresses:											
	Address Type	Street	City	State	Zip	Country						
	No Records											
	Add											
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Once an option has been selected, a new screen displays. Enter the information on the screen.





QUICK	REFEREN	<b>NCE</b>	<b>GUIDE:</b>
Select	Desired	Cre	dential

3 After a service type is selected, an additional questionnaire may open (DL only). Complete the Questionnaire, and then click OK.

	Ques	<u>stionnaire</u>	3		
	Read each	question caref	ully		
Depending on the question	n, the answer may requi	re further inform	ation to be ente	ered in the space provid	led.
D			- !		
Do you have normal u	e of your hands and re	eet? If no, expa	ain.		
Do you understand tra	fic signs and signals?	If no, explain.			
	<b></b>				

If the applicant's current age is under 18 a Guardian Information screen displays (DL only). Complete and click OK.

Test Date:	Examiner
Optional	Optional
First and Last Name:	Relationship
First and Last Name:	Relationship
First and Last Name: Guardian Name	Relationship
First and Last Name: Guardian Name	Relationship

