

IN THE COUNTY COURT, SEVENTH JUDICIAL CIRCUIT,
IN AND FOR ST. JOHNS COUNTY, FLORIDA

STATE OF FLORIDA

Case No.: _____

v.

Citation No.: _____

WITHDRAW OF SCHOOL OPTION

Carefully read this form before signing.

I made an election of traffic school for my citation. Due to unforeseen circumstances, I am withdrawing my option to complete a traffic course on my citation.

I am aware of the following conditions assessed by this election:

- Points will be assessed to my driving record.
- Traffic school may not be attended at a later date once this option is filed.
- This election will count as one of my five (5) elections allowed within my lifetime.
- The 18% reduction will be owed.

I, _____, hereby elect to withdraw my school election and understand this will result in a conviction on my driving record. I understand this option may not be changed after this form is signed and filed with the St Johns County Clerk of Courts office.

DEFENDANT NAME: _____
MAILING ADDRESS: _____
CITY, STATE, ZIP: _____
DAYTIME PHONE #: _____

Signature

Date

St Johns County Clerk of Courts
4010 Lewis Speedway
St. Augustine, Florida 32084
Traffic Number: (904)819-3628
Traffic Email: traffic@stjohnsclerk.com