Hearing Summary Report Hearing Summary Report

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Today's Date: 1/4/2024 Hearing Date: 1/4/2024 Agency: Ohio Department of Public Safety, Ohio Traffic Safety Office, Driver Training Rule Number(s): Chapter4501-7 If no comments at the hearing, please check the box. \square List organizations or individuals giving or submitting testimony before, during or after the public hearing and indicate the rule number(s) in question. 1. Click here to enter text. 2. Click here to enter text. 3. Click here to enter text. 4. Click here to enter text. 5. Click here to enter text. 6. Click here to enter text. 7. Click here to enter text. 8. Click here to enter text. 9. Click here to enter text. 10. Click here to enter text. 11. Click here to enter text. 12. Click here to enter text. 13. Click here to enter text. 14. Click here to enter text. 15. Click here to enter text.

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Consolidated Summary of Comments Received

Please review all comments received and complete a consolidated summary paragraph of the comments and indicate the rule number(s).

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Incorporated Comments into Rule(s)

Indicate how comments received during the hearing process were incorporated into the rule(s). If no comments were incorporated, explain why not.

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