	FOR OFFI	CE USE ONLY	
Receipt Number	LOT B	LOT C	Tag Number
DLN	REG_		POI

APPLICATION/PERMISSION FORM FOR DRIVING PERMIT

Complete both sides and return to the Principal's Office with your driver's license, proof of insurance and vehicle registration.

Student Name		
Career Tech Program		
ONE TAG WILL Vehicle #1	BE ASSIGNE	D PER STUDENT
License Plate Number	Make	Model
ColorYear	Ins	surance Co
		Expiration Date
Vehicle #2		
License Plate Number	Make	Model
Color Year		
Vehicle #3		
License Plate Number	Make	Model
Color Year		
Vehicle #4		
License Plate Number	Make	Model
Color Year		

(over)

STUDENT PARKING AGREEMENT

In exchange for the privilege of driving to school and securing a full-year parking permit, the student and parent agrees to the following conditions:

- 1. The student will park in the assigned parking lot.
- 2. The student will exit and lock his/her vehicle immediately upon arrival to school.
- 3. The student will display his/her parking tag correctly.
- 4. The student will drive carefully and responsible to and from school and while on school property.
- 5. The student will notify the Principal's Office of any changes in the information on the parking application form.
- 6. The student will permit the interior of the vehicle to be inspected upon request of the Principal or the Dean of Students.
- 7. The student will not allow his/her tag to be used by any other person or in any other vehicle that is not registered.
- 8. The student will not be in or around his/her vehicle, or any other vehicle in the parking lot during the school day without authorization from the Principal's Office.
- 9. The student will exchange insurance information in the event of an incident on school property involving his/her vehicle.

Student Signature	Date
Parent/Guardian Signature	Date
JUNIOR STUDENTS MUST Please permit my son/daughter to obt	THAVE THE FOLLOWING COMPLETE tain a full-year parking tag.
Student's Name	needs to drive to school due to the following
Diddoni S I taine	