

Application for Use of Private Automobile School Session

I am applying for the privilege to drive to school for the following reasons_____

rain apprying for the privilege to thrive t	school for the following	ig icasons		
If this application is approved, I undautomobiles. I understand that any violathe local school nor the School Board should be school. This permit is non-refundab	ntion on my part will res all be held responsible f	ult in my privileges being revok or damages incurred while on th	ed. It is further understood that neither e school grounds or property leased by	
Sec Regulation 2630 Use of Automobile	S			
See Regulation 5922 Revenue, Tuition,	and Fees			
Student Signature		Date		
I, the parent, or legal guardian of the aborevoked at the discretion of the school.	ove named student, appr	ove of this application and under	rstand that all privileges will be	
Parent or Legal Guardian Signature_		Date		
Parent or Legal Guardian Name	Print Clearly	Contact Phone Nu	ımber	
	Student Regis	tration Information		
For carpools each driver in	the carpool must complete	an application. Submit all application	ons together with payment.	
Student Name-Please Print Clearly		Grade Level Phone Number		
Address		Carpool (Sharing a Parking Pass, Multiple Drivers) O Yes O No		
City State	Zip	Zip Other Carpool Drivers		
Driver's License Number State		Other Carpool Drivers		
	Vehicle	e Information		
Make	Model	Year	Color	
License Plate Number State	Vehicle Insu	red O Yes O No	Insurance Company	
Owners Name	Address		Contact Number	
	Seco	ond Vehicle		
(I	Pass must be switched betw	veen vehicles and displayed each day	y)	
Make	Model	Year	Color	
License Plate Number State	Vehicle Insu	red OYes O No	Insurance Company	
Owners Name	Address		Contact Number	
	For additional ve	ehicles use a second form.		
	Scho	ol Use Only		
Permit # Parking Spa	ce # Date	Paid By	Amount	