

**APPLICATION TO DRIVE VEHICLES ON SCHOOL PROPERTY**

NAME OF STUDENT DRIVER \_\_\_\_\_  
(Last) (First) (Middle)

ADDRESS \_\_\_\_\_  
(Street #) (City, State) (Zip)

PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_ GRADE \_\_\_\_\_

DRIVER'S LICENSE # \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

PARENT/GUARDIAN \_\_\_\_\_

ADDRESS \_\_\_\_\_  
(Street #) (City, State) (Zip)

VEHICLE #1 LICENCE NUMBER OF VEHICLE \_\_\_\_\_

\_\_\_\_\_  
(Make/model) (Year) (Color)

VEHICLE #2 LICENCE NUMBER OF VEHICLE \_\_\_\_\_

\_\_\_\_\_  
(Make/model) (Year) (Color)

NAME AND ADDRESS OF INSURANCE COMPANY \_\_\_\_\_

\_\_\_\_\_  
 PHONE \_\_\_\_\_

TYPE OF COVERAGE \_\_\_\_\_

I hereby authorize my son/daughter to drive the above described vehicle(s) to and from school and verify that the information on this form is accurate to the best of my knowledge.

I also understand that if it is determined the driving privilege has been abused, his/her driving permit will be revoked by the school administration. In connection with this request, I consent to the unlocking, opening, and inspecting of the automobile and its contents while on school premises, based on reasonable suspicion of a school administrator that the vehicle or its contents may violate law or school rules.

**EXCESSIVE TARDINESS, UNEXCUSED ABSENCES, SKIPPING CLASS, AND OTHER INFRACTIONS ARE GROUNDS FOR REVOKING A STUDENT'S DRIVING PRIVILEGE. THIS WILL REQUIRE THE STUDENT TO RIDE THE BUS OR TO ARRANGE ALTERNATE TRANSPORTATION.**

\_\_\_\_\_  
(Parent/Guardian Signature) (Date)

\_\_\_\_\_  
(Student Signature) (Date)