

## STUDENT PARKING PERMIT REQUEST FORM

Paying by: Check # \_\_\_\_\_ Cash \_\_\_\_\_ PERMIT # \_\_\_\_\_

Student Name \_\_\_\_\_ Grade \_\_\_\_\_  
Last First M.I.

Address \_\_\_\_\_

Home Ph # \_\_\_\_\_ Cell Ph # \_\_\_\_\_ Student I.D. # \_\_\_\_\_

Driver's License # \_\_\_\_\_ Birthdate \_\_\_\_\_

### **Vehicle #1**

License Plate # \_\_\_\_\_ Make/Model \_\_\_\_\_ Color \_\_\_\_\_

### **Vehicle #2**

License Plate # \_\_\_\_\_ Make/Model \_\_\_\_\_ Color \_\_\_\_\_

### **RULES AND REGULATIONS FOR STUDENT DRIVERS**

1. When permit is granted, it is for the above student and vehicle(s) only.
2. Students are to park in the designated parking lots and must display their parking tag.
3. Excessive tardiness, truancy, skipping classes, and other infractions may result in loss of driving privileges.
4. Students are not permitted in any automobile during regular school hours without permission from the administration.
5. Students must drive slowly and carefully (not over 10 mph) in the parking lot and no faster than the posted speed limit in the driveways. Unnecessary noises or reckless operation will not be permitted.
6. Drivers must give buses the right of way and use extreme caution around school buses.
7. Upon entering or leaving, drivers must keep to the right and observe the no-passing rule.
8. Drivers must obey the directions of personnel directing traffic.
9. Parking is provided as a convenience and privilege. Vehicles parked on school property are subject to search by school officials at any time. Any items found in a vehicle of contraband status may be confiscated.
10. Please review the 'Driving' section in your Agenda.

**NOTE:** Students drive and park their vehicles at Twinsburg High School at their own risk. Twinsburg City Schools does not assume responsibility for damage to vehicles or theft of personal property incurred while on school grounds.

**I HAVE READ AND UNDERSTAND THE RULES AND REGULATIONS FOR STUDENT DRIVERS. I UNDERSTAND THAT FAILURE TO OBSERVE ANY OF THESE RULES MAY RESULT IN THE SUSPENSION OF MY PERMIT.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**\*\*\* Please complete the insurance information on the back of this form. \*\*\***

**STUDENT PARKING PERMIT PARENT AUTHORIZATION FORM**

Parent/Guardian Name \_\_\_\_\_

Home # \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

E-mail \_\_\_\_\_

Automobile Insurance Provider \_\_\_\_\_

Type of Coverage \_\_\_\_\_ Policy # \_\_\_\_\_

I hereby authorize my son/daughter to drive the aforementioned 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.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Student Signature