

2023-2024 SOUTHMORELAND SENIOR HIGH APPLICATION FOR DRIVING

SECTION A:	Student Name: _____	Grade: _____	Homeroom: _____
	Home Address: _____	Home Phone: _____	
	<u>SHS</u> Sibling(s): _____	Parent Cell: _____	
		Student Cell: _____	

SECTION B:	Vehicle Make: _____	Model: _____	Year: _____
	Color: _____	License Plate #: _____	
	Vehicle Make: _____	Model: _____	Year: _____
	Color: _____	License Plate #: _____	

If more than one vehicle will be driven by the student, it must be registered with the office.

SECTION C: PARENTAL CONSENT	As parent/guardian, I give my consent to the student named at the top of this application to drive to school, and I certify that his/her driving is a necessity. I have received, read, and reviewed the Rules and Guidelines for parking with my child and will share the responsibility for compliance with them. I understand students are NOT permitted to drive other passengers (except siblings) to or from school, and student parking spaces will be assigned by the building administrators. Failure to follow the rules and guidelines will result in the revocation of driving/parking privileges.
	Parent Signature: _____ Date: _____

SECTION D: STUDENT CONTRACT	I have received and read the Rules and Guidelines for driving to school and parking on school property. I understand that it is a privilege I have earned and, therefore, it is my responsibility to maintain that privilege by meeting the conditions for selection as set forth in the Rules and Guidelines . I agree to submit the appropriate Application Fee of \$30.00 and all necessary documents required.
	Student Signature: _____ Date: _____

Office use only:

Driver's license: _____
Proof of insurance: _____
Registration: _____

Payment method: _____ **Date:** _____ **Pass #:** _____