



# Central High School

## Temporary Parking Application

Office Use Only

Date and time received:

1. Central High School Administration is aware that situations occur that may require a student to drive to school. Such situations include but are not limited to doctor appointment and family emergency. When these situations happen, students may be issued a temporary parking permit.

In the event a student needs to drive for a **planned situation** the following must be submitted to the Door 4 Dean Assistant:

1. Completed Temporary Parking Application
2. Copy of driver's license
3. Copy of automobile insurance
4. Signed note from parent guardian stating reason

In the event a student needs to drive for an **unplanned situation** the following must be submitted to the Door 4 Dean Assistant:

1. Copy of driver's license
2. Copy of automobile insurance
3. Signed note from parent guardian stating reason

## 2. Student Information

Last Name (print)	First Name (print)	Grade

Driver's License Number
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Turn over to complete application

**3. Vehicle Information**

	Vehicle #1	Vehicle #2	Vehicle #3
<b>Make</b>			
<b>Model</b>			
<b>Year</b>			
<b>Color</b>			
<b>License Plate #</b>			

**4.**

As a parent/legal guardian of the student named on this application, consent is hereby granted for him/her to drive to school. It is requested that an Emergency Parking Permit be issued for the vehicle(s) identified on this application.

Signature of Parent/Guardian:	Date:
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As a student at Central High School, I understand the attached statement signed by my parent/guardian and hereby agree to assume the responsibility associated with the privileges of driving to school and use of the school parking facilities.

Signature of Student:	Date:
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