

*For Office Use Only*

\_\_\_ Valid NY Driver License, \_\_\_ Vehicle Registration for Each Vehicle , \_\_\_ Complete Vehicle Information,  
 \_\_\_ Signed Parking Rules and Regulations, \_\_\_ Completed Application with Signature, \_\_\_ 50 Safe Driving Points

Permit# \_\_\_\_\_  
 Spot # \_\_\_\_\_  
 Date: / /

## NORTH SALEM HIGH SCHOOL – PARKING PERMIT APPLICATION 2018-2019

(Read carefully – Incomplete applications will not be processed)

Student's Full Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_ Grade Level for 2018-2019: \_\_\_12\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

NY Driver License #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Driver's License Expiration Date: \_\_\_/\_\_\_/\_\_\_

### VEHICLE INFORMATION

	Year	Make	Model	Color	License Plate
Vehicle # 1					
Vehicle # 2					

**REASON:** 1. After school employment – Employer \_\_\_\_\_ Phone # \_\_\_\_\_  
 Hours \_\_\_\_\_ Days \_\_\_\_\_

2. Extra-Curricular Activity - Activity/Sport \_\_\_\_\_ Season \_\_\_\_\_  
 Practice Times \_\_\_\_\_

3. Other – Explain- \_\_\_\_\_

### PARENT'S / GUARDIAN'S PERMISSION TO DRIVE, PARK AND/OR TO LEAVE CAMPUS

I give my permission for my son/daughter, \_\_\_\_\_, to:  
 (check one or both)

- drive to and from school and park on campus  
 drive off campus during open periods

\_\_\_\_\_ Date \_\_\_\_\_  
 Signature of Parent/Guardian

Parent(s) Daytime Phone No.(s): \_\_\_\_\_ Parent(s) Cell Phone No.(s): \_\_\_\_\_  
 Parent(s) E-Mail Address(es): \_\_\_\_\_

### DRIVING, PARKING AND OFF-CAMPUS PRIVILEGE STUDENT / PARENT AGREEMENT

This permit will be revoked should the student be guilty of poor attendance, unsafe driving practices, carrying unauthorized passengers, arriving late and/or leaving early or violate of any rule listed on the "Driving Rules and Regulation" sheet. I agree to abide by the North Salem High School *Code of Conduct* (see online at the NSHS website at <http://www.northsalemsschools.org/> under "Student Codes") to maintain my parking permit and leave privileges. I understand that if I violate any of the NSHS Parking Rules and Regulations (see enclosed), my permit and leave privileges may be subject to revocation.

I have read and agree with the above statement. **Student signature on this application will constitute as his/her only warning.**

\_\_\_\_\_  
 Student's Signature Date Parent's/Guardian's Signature Date

#### YOUR PARKING PERMIT APPLICATION PACKAGE MUST INCLUDE:

- \_\_\_ Completed, signed application with your Parent's/Guardian's signature
  - \_\_\_ Signed copy of the NSHS Parking Rules and Regulations
  - \_\_\_ Clear copy of your valid New York driver's license (not a permit)
  - \_\_\_ Clear copy of vehicle registration for each vehicle listed above
- \_\_\_ 50 Safe Driving Points