

WEST DEPTFORD HIGH SCHOOL STUDENT PARKING APPLICATION

Decal # _____

There is a parking fee of \$5.00.

***** RETURN THIS APPLICATION TO THE ATTENDANCE OFFICE.**

**ELIGIBLE JR. DRIVERS MAY SUBMIT APPLICATIONS BEGINNING OCTOBER
6TH!**

Student Name _____ Gr. _____ requests
permission to drive a vehicle to and from school and to park on school grounds.

**The following original documentation must be submitted before this application is
processed.**

VEHICLE INFORMATION

Make _____ Model _____ Color _____
Year _____ License Plate Number _____

DRIVER INFORMATION

License No.: _____
Insurance Provider: _____
Insurance Policy Number : _____

verify that the foregoing information is complete and correct. If I receive permission to drive to school, I shall abide by the rules stated in the Student Handbook and BOE Policy. I realize that **no responsibility** is assumed by the school for any damage which may occur to cars while parking on school property. I know that I must have my driver's license, registration and insurance information in my possession at all times and will show them upon request. I understand that the right to park on school property is a **privilege** and may be revoked. I further understand that compliance with the Random Drug Testing policy is a prerequisite to gaining a parking permit. Completion of this form does not necessarily assure that a driving permit will be issued.

Student Signature _____ Grade _____ Date _____

Parent/Guardian Signature _____ Date: _____

For Office Use Only

Proof of the following:

- Driver's License
- Registration
- Insurance Provider Card/ Policy No.
- Random Drug Testing Permission Form
- Parking Fee (\$5.00) cash or check _____