



Passenger Name:		Date:	
Passenger Address:		Contact Number:	
DCTS Program:		(AM/PM):	
Sending School:			
Driver's Name:			
Driver's Parking Tag #			
Reason for the need to ride to and from DCTS:			
<p>I understand that being a passenger in another student's car is a privilege and not a right. I have read the policy regarding student passengers outlined in the student handbook and agree to adhere to all of the regulations. I understand that failure to do so may result in a revocation of passenger privileges and/or other disciplinary action.</p> <p>_____</p> <p>(Passenger's Signature) (Date)</p>			
<p>I am fully aware that my son/daughter will be riding to and from the Delaware County Technical High Schools with the above listed driver and has my permission to do so.</p> <p>_____</p> <p>(Passenger Parent/Guardian Signature) (Date)</p>			
<p>I give permission for the above named passenger to ride to and from the Delaware County Technical High Schools with my son/daughter.</p> <p>_____</p> <p>(Driver Parent/Guardian Signature) (Date)</p>			
<p>I hereby give permission to the above student to ride to and from the Delaware County Technical High Schools with the above listed driver.</p> <p>_____</p> <p>(Sending School Administrator) (Date)</p>			
<p>I hereby give permission to the above student to ride to and from the Delaware County Technical High Schools with the above listed driver.</p> <p>_____</p> <p>(DCTS Administrator) (Date)</p>			

Approved July 23, 2015 by Katherine Meehan, Esq. for Michael V. Puppio, Jr., DCIU Solicitor

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