

BUTLER COUNTY AREA VOCATIONAL-TECHNICAL SCHOOL
TEMPORARY STUDENT DRIVING PERMIT

Student Name: _____ Vo-Tech Course: _____
Date(s) Permitted to Drive: _____ Home School: _____

The above named student is permitted to drive to Butler County AVTS on the date(s) indicated above provided that a parent/guardian and home school principal have given their approval on this form.

I permit my son/daughter to drive to Butler County AVTS on the above date(s).
If applied for and approved, I understand passengers are not permitted to be transported, with a temporary parking permit.

Signature of Parent/Guardian: _____ **Date:** _____

I approve driving privileges for the student named on this form.

Signature of Home School Principal/Assistant: _____ **Date:** _____

I accept the responsibility involved in driving to Butler County AVTS and agree to comply with regulations as prescribed relevant to driving and parking.

Signature of Student: _____ **Date:** _____

Signature of BCAVTS Principal/Assistant Director: _____ **Date:** _____

<p style="text-align: center;">**MUST BE COMPLETED BY STUDENT**</p> <p>VEHICLE MAKE: _____ MODEL: _____ PLATE NUMBER: _____</p> <p>WHERE VEHICLE IS PARKED? ____ SHOP ____ BACK LOT ____ OTHER (EXPLAIN) _____ _____</p>

<p style="text-align: center;"><u>THERE IS A \$5.00</u> <u>FEE FOR EACH TEMPORARY</u> <u>STUDENT DRIVING</u> <u>TAG ISSUED.</u></p> <p style="text-align: center;">____ PAID ____ FT ____ INITIALS</p>
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*****THE STUDENT WILL RECEIVE A TEMPORARY TAG TO DISPLAY ON THE REAR VIEW MIRROR WHEN THIS FORM IS COMPLETE*****

Procedure to leave the parking lot:
Students are NOT permitted to leave the parking lot until the buses have gone. The parking lot attendant will direct students when and how to leave the parking lot.