

STUDENTS**3450F**Student Vehicle Parking Application_____
Student Name (please print)_____
Age_____
School_____
Student Address_____
City_____
Zip Code_____
Student Cell phone #_____
Guardian Cell Phone #_____
Vehicle Make/Color_____
Model_____
Year_____
License Plate No._____
Student's Driver's License No._____
Insurance Co. Name_____
Insurance Agent's Name_____
Insurance Policy No._____
Name of Car Owner

I certify, by my signature below, that the above information is true. I agree that my being able to operate and to park a vehicle on school property is a privilege conditioned on my willingness to have that vehicle subject to search by school authorities at any time the vehicle is on school property when, in the judgment of the building administrator, a reasonable suspicion of a violation of Idaho law or District policies or rules exists. I also understand that it is my responsibility to follow school parking procedures, obey the speed limit on school grounds, to operate the car safely going to and from school and school events, to park in designated areas and to maintain legally required insurance on the vehicle. Finally, I understand that any violation of this agreement or other school rules can lead to the revocation of all parking privileges. I further understand that motor vehicles in violation of the District's Student Vehicle Parking policy may be subject to towing.

Student Signature_____
Date

I, the parent/legal guardian of _____, hereby verify the information supplied above and understand and agree with the rules pertaining to the operation of a vehicle by students of the District.

Parent/Guardian Signature_____
Date

Policy History:

Adopted on: November 9, 2009

Revised on: July 13, 2023

Revised on: November 11, 2024