

PARKING IS FOR
SENIORS ONLY
WITH A CLASS “D”
LICENSE



BELLPORT HIGH SCHOOL
MEMORANDUM

August 2024

To Bellport High School Seniors and Parents/Guardians of seniors,

Please find a Senior Parking Permit Application, attached. If you intend to use the Bellport High School student parking lot, you must fill out the attached application. When returning, please attach a copy of your Class "D" license, a copy of your insurance card, along with a copy of your registration and drop it off in room 106.

Please be reminded that our eligibility policy will be strictly enforced. **Any student who is not academically eligible must attend Study Center in order to retain this senior privilege. Students who do not meet the academic requirements will not be eligible for a parking permit at this time.**

Should you have any questions, please feel free to call 730-1587.

Thank you for your anticipated cooperation.

Sincerely,

Dan Fauvell
Assistant Principal

/lh
Attachment

BELLPORT HIGH SCHOOL
205 Beaver Dam Road
Brookhaven, New York 11719

SENIOR PARKING PERMIT APPLICATION 2024-2025

STUDENT _____
Last Name First Name

DATE OF BIRTH _____ PHONE NUMBER _____

AUTOMOBILE INFORMATION

Make: _____
Model: _____
Year: _____
Color: _____
Plate #: _____

PARENT/GUARDIAN STATEMENT

I certify that my child (named above) has a valid NEW YORK STATE SENIOR DRIVER'S LICENSE and has my permission to drive to and from Bellport High School.

Parent/Guardian's Signature

Date

Note: Please attach a copy of the following documents with your application:

- Driver's License
- Vehicle Registration Card
- Current Insurance I.D. Card

No permit will be issued without the above documentation.

PERMIT # _____

(Please see reverse side)

PARKING PRIVILEGE CONTRACT – SCHOOL YEAR 2024-2025

For the 2024-2025 school year only seniors with a class “D” license may park in the lot

I agree and understand that driving to school is a **SENIOR PRIVILEGE** and not a right. As a privilege, I realize that I must follow the rules listed below in order to keep this privilege.

1. **PARK IN ASSIGNED STUDENT AREA ONLY.**
2. Driving in a reckless or unsafe manner will result in permanent revocation of your parking permit.
2. Transportation of unauthorized students from school would result in permanent revocation of your parking permit. Students taken during school hours who are not authorized to leave their class or the building for dismissal are considered unauthorized.
4. Students arriving late who neglect to sign in and get a late pass or students leaving school early without an early dismissal pass, will have their parking permits permanently revoked.
5. Temporary parking passes must be picked up in Mr. Fauvell’s office, Room 106. If you are using a vehicle other than the one you received a permit for you must fill out another application for that vehicle. No exceptions!
6. Five days cumulative Out Of School Suspension will result in permanent revocation of your parking permit effective on the day when the 5th day of suspension has been accrued.
7. You must be academically eligible to apply for a permit. Students who are not academically eligible must attend Study Center until their GPA improves to retain their parking privileges.
8. In addition to having your parking privileges revoked, there may be additional disciplinary consequences administered by the school. This depends on the TIME and EVENTS surrounding the infraction whenever there is a violation.
9. Students who are absent from their first academic class more than 7 times in a quarter will have their parking privileges revoked.
10. Students who miss detention due to excessive lateness will have their permit revoked.
11. More than 8 latenesses to school (or 2 detentions) will result in permanent revocation of student parking permit.

Parents will be notified by phone and in writing whenever a violation occurs.

I HAVE READ THE ABOVE GUIDELINES AND I AGREE TO FOLLOW SUCH GUIDELINES AS STATED. IF THE LANGUAGE CONTAINED IN THE GUIDELINES IS NOT CLEAR TO YOU PLEASE STOP BY MR. FAUVELL’S OFFICE FOR CLARIFICATION. BY SIGNING THIS DOCUMENT, BOTH YOU AND YOUR PARENT/GUARDIAN ARE IN FULL AGREEMENT WITH THE SCHOOL CONCERNING THIS PRIVILEGE AND WILLINGLY WAIVE YOUR RIGHT TO APPEAL ANY ACTION TAKEN BY THE SCHOOL. THESE GUIDELINES ARE NOT MEANT TO COVER EVERY SCENARIO. THEREFORE, THE SCHOOL RESERVES THE RIGHT TO USE PROFESSIONAL DISCRETION WHEN NECESSARY.

Student: _____ Parent/Guardian _____

Date: _____

PLEASE RETURN ALL DOCUMENTATION TO MRS. HARTNETT - ROOM 106