

TEMPORARY STUDENT DRIVING PERMIT

DRIVER'S NAME: _____ CTE PROGRAM: _____ am pm
(Circle one)

HOME SCHOOL: _____ FOR DATE(S): _____

PURPOSE: _____

DRIVER AND VEHICLE INFORMATION

YEAR: _____ COLOR: _____ MAKE: _____ MODEL: _____ TYPE: _____

VEHICLE PLATE NO.: _____

REGULATIONS

1. Student will drive vehicle to the Career and Technical Center (CTC) only with permission of the student's CTE program instructor, student's parent/guardian, and the home school administrator.
2. When the student arrives at CTE, student will submit completed, signed form to staff attending the parking area.
3. ***Student will have NO passengers in their vehicle at any time.***
4. The student will report any damage to HFM BOCES property if it occurs to school officials.
5. Student will arrive on time for class.
6. The student will drive slowly and cautiously, following all traffic safety rules and regulations.
7. The student will park in designated areas only.
8. When the student leaves CTE, the student must hand back the driving permit to attending staff. If a staff member is not present when the student is leaving, the student must bring the permit to the main office and submit to the secretary for appropriate routing before leaving the campus.
9. The student will depart from CTE after all buses have left CTE unless directed by school staff to do otherwise.
10. Violators of any of these regulations may result in loss of the driving privilege.

Note: The HFM BOCES is not responsible for any vehicle damage or theft.

I acknowledge and agree to all of the above terms for the privilege of the temporary student driving permit.

Signature of Student: _____ Date: _____

APPROVAL SIGNATURES: ***(Follow steps in order)***

CTE Instructor: _____ Date: _____

Parent/Guardian: _____ Date: _____

Home School Administrator: _____ Date: _____

CTE Principal Signature: _____ Date: _____

Dates Driving to School: _____

THE CAREER AND TECHNICAL CENTER OR THE HOME SCHOOL RESERVES THE RIGHT TO REFUSE APPROVAL OF THIS PERMIT.