



## STUDENT PARKING APPLICATION

STUDENT NAME \_\_\_\_\_ STUDENT ID # \_\_\_\_\_

### VEHICLE INFORMATION

If you will be driving more than one vehicle to school, supply the information for each vehicle. There is a \$35 fee for each additional or replacement parking sticker.

1. Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_

Plate/Tag State \_\_\_\_\_ Plate/Tag # \_\_\_\_\_

2. Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_

Plate/Tag State \_\_\_\_\_ Plate/Tag # \_\_\_\_\_

### PARENT CONTACT INFORMATION

1. Parent/Guardian Name \_\_\_\_\_ Cell # \_\_\_\_\_

2. Parent/Guardian Name \_\_\_\_\_ Cell # \_\_\_\_\_

### PARENT ACKNOWLEDGEMENT

I (parent/guardian) \_\_\_\_\_ give my student permission to drive to school and verify that he/she is covered by my insurance. I understand parking is a privilege at Seckinger High School and not a right, and that it is my responsibility to ensure they have transportation to and from school each day.

\_\_\_\_\_  
Parent/Guardian signature Date \_\_\_\_\_

### STUDENT ACKNOWLEDGEMENT

I have received a copy of the parking section from the current year Seckinger High School Student Handbook and agree to abide by the rules and information included therein.

\_\_\_\_\_  
Student signature Date \_\_\_\_\_

**You must provide a photocopy of your driver's license and proof of insurance.**