

HARRISVILLE CENTRAL SCHOOL
14371 Pirate Lane
Harrisville, NY 13648

Rolf A. Waters
Superintendent & K-5 Principal

Mary E. Curcio
6-12 Principal

PERMISSION TO DRIVE TO SCHOOL

Student Name _____

Grade _____ Homeroom _____ Type of License: Driver Junior Driver

VEHICLE INFORMATION:

Make _____ Year _____ Color _____ Plate Number _____

Type: Car Truck Van SUV Motorcycle

Owner of Vehicle _____

How often do you drive to school? Daily Once a week Occasionally

PARENT REQUEST FOR STUDENT TO DRIVE:

I request that my son/daughter be permitted to drive to and from school. I understand that violation of school driving regulations as stated in the Student Handbook will result in the loss of this privilege.

Date: _____ Parent's Signature _____

STUDENT DECLARATION:

I have read the Rules and Regulation in the Harrisville Central School Student Handbook and pledge to obey them. I realize that any violation will be sufficient cause to withdraw this privilege of driving and parking in the school parking lot.

Date: _____ Student Signature _____

OFFICE USE ONLY

APPROVED High School Principal _____

PERMIT NUMBER _____ \$5.00 Permit Fee Paid _____

\$5.00 Permit Fee Refunded _____

I, _____, received my \$5.00 Permit Fee Refund on _____.