

Issued Card Number _____

For the 2023-2024 School Year



Driving/Parking Permit

Name _____
Last First Middle

Address _____ City _____ Zip _____

Car Make/Model _____ Year _____ Color _____

License Plate Number _____

We agree to abide by all the school regulations concerning driving and parking. For complete regulations, please reference the CEVEC Student Code of Conduct. We understand that violations will result in suspension of these privileges. The district requires student drivers to comply with all the state motor vehicle laws, including the law requiring the carrying of the automobile insurance. In providing parking for student drivers, the District assumes no liability for the operation of any motor vehicle by any student. The students who fail to register or display the parking permit may have their driving privileges revoked.

Student Signature _____ Date _____

Parent Signature _____ Date _____

Principal's Signature _____ Date _____

Please return to the front office