PARKING AND DRIVING TO SCHOOL

CIRCLE ALL THAT APPLY:

TRAVEL SENIOR JUNIOR SOPHOMORE

Fill out the application below and turn it in to the Dean's office. The Dean will okay the students who are eligible and will notify them as to what they need to do. NO STUDENT MAY PARK IN THE SCHOOL LOT WITHOUT A DECAL. (VIOLATORS WILL BE TICKETED AND/OR TOWED.) You must have a current City Sticker. The parking fee is $75.00. It is not refundable or pro-rated if parking privilege is revoked.

PARKING PERMIT APPLICATION

STUDENT NAME: _____ I.D.# _____
LAST FIRST

ADDRESS: _____CITY_____ PHONE #_____

DRIVER'S LICENSE # _____ CELL PHONE # _____

MAKE: _____ MODEL: _____ YEAR _____

COLOR: _____ PLATE#: _____

If issued a parking permit, I promise to abide by all safety and traffic regulations while on the school property. These include:

1. Parking in the student assigned spot **(ALL STUDENT PARKING IS NUMBERED)**.
2. Driving no faster than **5 mph** while on school property.
3. Refraining from smoking in my car while on school property.
4. Obeying all regulations covered by the State of Illinois Driving Code Manual.
5. **DISCIPLINARY/ATTENDANCE PROBATION/LOSS OF PRIVILEGES** may **VOID** your parking privileges.
6. **YOU MAY NOT LET ANOTHER STUDENT USE YOUR DECAL OR ASSIGNED SPOT.**

I UNDERSTAND THAT ANY VIOLATIONS OF THE ABOVE WILL WARRANT THE REMOVAL OF MY DRIVING PRIVILEGES. IN RETURN FOR THE PRIVILEGE OF PARKING AT OFHS, I CONSENT TO HAVE MY VEHICLE AND ITS PERSONAL EFFECTS SEARCHED WITHOUT NOTICE.

STUDENT SIGNATURE: _____ DATE: _____

PARENT SIGNATURE _____ DATE: _____

PERMIT # ISSUED: _____ APPROVED BY: _____

PARKING LOT # ISSUED _____

Please attach a copy of your Driver's License and Insurance card.