

MENTOR HIGH SCHOOL APPLICATION FOR STUDENT PARKING

Grade: _____ Date: _____
(Please Print) Last name First name Student No. _____

I request the privilege of driving to school. If my request is approved, I agree to comply with the following rules and regulations.

1. The student applying must present a valid Ohio Driver's license and proof of vehicle insurance.
2. A student may have only one valid parking permit at a time. If it becomes necessary to register a different vehicle, the student will need to bring in the proof of insurance and license number so it can be changed on their application and the parking data base. A student may not share a registered permit with anyone else. No student may use a permit registered to another student. The use of a falsified permit will result in disciplinary action for the student.
3. A parking permit, which is lost, stolen, or missing for any other reason will not be replaced. The student will lose parking privileges until the permit is recovered.
4. The actual parking permit must be attached to the rearview mirror. Permits may not be laminated, covered, or put on plastic, etc. If a permit is altered there will be a replacement fee and a disciplinary consequence.
5. The student may park only in the designated lot. Parking in areas such as fire lanes, faculty parking, traveling staff or visitor parking areas may result in your vehicle being towed, a tire lock attached and/or appropriate disciplinary action being taken.
6. Once the vehicle has been parked, the student(s) must immediately exit and lock the vehicle. No student may reenter the vehicle unless he/she promptly leaves school property at the designated dismissal time or with an authorized pass.
- 7A. Student parking is provided as a privilege at Mentor High School. School officials retain the right to examine the contents and/or search a student's vehicle parked on school premises when they have a reasonable belief that items contained in the car may interfere with the safe or effective operation of the school. Any car on school property is under this guideline.
- 7B. Motor vehicles driven by students and parked on school property are subject to random search by dogs trained to detect the presence of drugs. These searches may be conducted without regard to whether there is a reasonable suspicion that any motor vehicle or its contents contains evidence of a violation of a criminal statute or a school rule.
8. All drivers must comply with State of Ohio and City of Mentor vehicle regulations while on school property.
9. Violation of parking rules and regulations may result in your vehicle being towed at the owner's expense or a tire lock attached.
10. Any violation of Board Policy 5600 may result in loss of parking privilege.

STUDENT SIGNATURE _____

I hereby give consent for my son/daughter to drive the registered vehicle to and from school and

OFFICE USE ONLY

Permit #: _____

LOT: N W S STADIUM

APPLICANT COMPLETE

Auto License Plate Number

VEHICLE INFORMATION
(*Only one vehicle registered)

Year

Make of Vehicle

Color of Vehicle

Owner Name

Drivers License Number
(License must be presented)

*If you need to drive a different vehicle, you must present a note from your parents and sign in each morning you drive it. Permits cannot be switched to non-registered vehicles.

Please circle the appropriate Career Technical Education program and obtain the instructor's signature for approval.

- ASE CBE CBI
- COS DCT ECE
- GA IM MKTG

Career Technical Education
Teacher Signature

Administrator Approval

will cooperate to see that the above rules and regulations are carried out. I realize that the privilege of driving may be revoked for any infraction of the above regulations. My signature indicates that I have read and agreed with the rules listed above. I have also read and understand Board Policy 5515, Student Parking.

**PARENT
SIGNATURE** _____

Complete the following information and bring current proof of insurance showing the vehicle that will be driven when you return this application. No permit will be issued without proof of insurance in effect.

Insurance Agency: _____ Policy Number:

Address: _____ Agency Phone:

**RETURN THIS COMPLETED APPLICATION TO THE
RECORDS OFFICE**

Revised 5/05