

Student Driver Permission Slip

Student Name: _____ Grade: _____

Driver's License #: _____ License Plate #: _____

Vehicle Make/Model: _____

Parent/Guardian Permission

I give permission for my student to drive to and from school. I understand:

- Driving is a privilege that can be revoked for unsafe/reckless driving.
- I need to provide the school with Proof of Insurance.
- Students must park in designated areas only.
- The school is not responsible for vehicles or belongings left in them.
- Transporting other students requires written permission from all parents/guardians involved.

Parent/Guardian Name: _____

Signature: _____ Date: _____

Student Agreement

I agree to follow all school driving rules and traffic laws. I understand unsafe driving may result in the loss of driving privileges.

Student Signature: _____ Date: _____

Guidance Counselor:

Approved _____ Date: _____

Please complete and return this form to the school office. Your student is not permitted to go off campus until this form is turned in to the school office with all necessary boxes check and required signatures

Please complete and return this form to the school office. Your student is not permitted to go off campus until this form is turned in to the school office with all necessary boxes check and required signatures