

Please check if applies for

____ - ____ School Year:

____ WBL

____ Minimum Day

____ Dual Enrollment



SPACE NUMBER
(Parking Admin. Only)

Paulding County School District - East Paulding High School

____ - ____ Student Parking Application

INSTRUCTIONS FOR FILING:

This application is for registering a vehicle by the student for the purpose of securing a parking space. Rules and regulations pertaining to on-campus parking and operation of vehicle are contained herein. Completion of this application shall be construed as acceptance of the parking and operation rules and regulations. Students who elect to drive a vehicle shall complete this application. Applications will be subject to review and approval by the principal or his designee. Applications will be kept on file at the school. **The East Paulding Administration reserves the right to determine where a student parks on campus.**

PARKING FEE (Choose One): ____ **\$100.00** - School Year ____ **\$50.00** - 2nd Semester ____ **\$25.00** - After May 1st

Applicant's (Student) Information:

Grade (____ - ____)

____ Last Name ____ First Name ____ Middle ____ Date of Birth ____ Student ID #

____ Street Address/Apartment No. ____ City ____ State ____ Zip Code ____ Driver's License Number

Vehicle Information:

____ Year ____ Make of Vehicle ____ Model (Name/No.) ____ Body Style ____ Color-Vehicle

____ Tag Number ____ Vehicle ID # (VIN):

Automotive Insurance Information:

____ Insurance Company's Name ____ Policy Number ____ Expiration Date

After reading and understanding the rules and regulations as stated on the East Paulding High School Parking Contract, the undersigned acknowledges that permission to drive and/or park an automobile on the school campus is a privilege and not a right. In consideration for such privilege, the undersigned expressly consents to any searches of the above-described vehicle, or any other vehicles driven by applicant by administrators of the school for any reason, at any time, while said vehicle(s) is on school property.

E-Signature of Driver/Applicant: _____ **Date:** _____

E-Signature of Parent/Guardian: _____ **Date:** _____

TO BE COMPLETED BY THE SCHOOL:

Approved: ____ Yes ____ No
Revtrak: _____
Order Number: _____

Number of Unexcused Absences: ____ Number of Credits Earned: ____
Number of Tardies to School: ____ Fines Owed: ____
Number of Behavior Incidents: ____