

**North Gem School District #149**

**STUDENTS**

**3450F**

Student Vehicle Parking Application

_____	_____	_____
Student Name (please print)	Age	School
_____	_____	_____
Student Address	City	Zip Code
_____	_____	_____
Vehicle Make	Model	Year
_____	_____	_____
License Plate No.	Student's Driver's License No.	
_____	_____	
Insurance Co. Name	Insurance Agent's Name	
_____	_____	
Insurance Policy No.	Name of Car Owner	
_____	_____	

I certify, by my signature below, that the above information is true. I agree that my being able to operate and to park a vehicle on school property is a privilege conditioned on my willingness to have that vehicle subject to search by school authorities at any time the vehicle is on school property when, in the judgement of the building administrator, a reasonable suspicion of a violation of Idaho law or District policies or rules exists. I also understand that it is my responsibility to obey the speed limit on school grounds, to operate the car safely going to and from school and school events, to park in designated areas, and to maintain legally required insurance on the vehicle. Finally, I understand that any violation of this agreement or other school rules can lead to the revocation of all parking privileges. I further understand that motor vehicles in violation of the District's Student Vehicle Parking policy may be subject to towing.

_____	_____
Student Signature	Date

I, the parent/legal guardian of \_\_\_\_\_ hereby verify the information supplied above and understand and agree with the rules pertaining to the operation of a vehicle by students of the District.

_____	_____
Parent/Guardian Signature	Date