STUDENT DRIVING PERMIT APPLICATION

All high school students are required to use school buses, provided at no cost, both to and from the HFM Career and Technical Center. Limited parking spaces are reserved for faculty, staff, and adult students. There are a limited number of permits available to high school students who have special circumstances and have excellent attendance and classroom behavior, satisfactory grades, and arrive on time.

**DRIVER’S NAME:** __________________________  **CTC PROGRAM:** _______________________  **am** **pm**  
(Circle one)  
**HOME SCHOOL:** ___________________________  **FOR DATE(S):** ______________________________  
**PURPOSE:** _______________________________________________________________________________

**DRIVER AND VEHICLE INFORMATION**

**YEAR:** _______  **COLOR:** _______  **MAKE:** _______  **MODEL:** _______  **TYPE:** _______

**VEHICLE PLATE NO.** __________________________________________________________________________

**REGULATIONS**

1. Student will drive vehicle to the Career and Technical Center (CTC) only with permission of the student’s CTC program instructor, student’s parent/guardian, and the home school administrator.
2. The student will submit the completed, signed form to Mr. DiMezza.
3. The student will not be allowed to drive on campus until he/she has been issued the driving permit.
4. The student will maintain excellent attendance, classroom behavior and satisfactory grades.
5. **Student will have no passengers in his/her vehicle at any time.**
6. If it occurs, the student will report any damage to HFM BOCES property to school officials.
7. Student will arrive on time for class.
8. The student will drive slowly and cautiously, following all traffic safety rules and regulations.
9. The student will park in designated parking areas.
10. The student will depart from the CTC after all buses have left the CTC unless directed by school staff to do otherwise.
11. Allow school officials and/or law enforcement personnel to search my vehicle.
12. Violators of any of these regulations may result in loss of the driving privilege.

**Note:** The HFM BOCES is not responsible for any vehicle damage or theft.

I pledge that all information provided is true. I understand that I am not to drive my vehicle until I have received my parking permit. I also acknowledge and agree to all of the above terms for the privilege of the student driving permit.

**Signature of Student:** __________________________ __________________________  **Date:** ________________

THE CAREER AND TECHNICAL CENTER OR THE HOME SCHOOL RESERVES THE RIGHT TO REFUSE APPROVAL OF THIS PERMIT.

Amsterdam ● Broadalbin-Perth ● Canajoharie ● Edinburg ● Fonda-Fultonville ● Fort Plain ● Gloversville  
Johnstown ● Lake Pleasant ● Mayfield ● Northville ● Piseco ● Oppenheim-Ephratah-St. Johnsville ● Wells ● Wheelerville

www.hfmboces.org
EMPLOYMENT

Employer’s Name ________________________________________________________________

Employer’s Address _______________________________________________________________________________

Employer’s Phone Number __________________________________________________________________________

Work Days: __________________________________________ Work Hours: _________________________________

EDUCATION RELATED

Describe the need:
______________________________________________________________________________________________
______________________________________________________________________________________________

Name of Contact Person: __________________________________________ Phone Number___________________

APPROVAL SIGNATURES: (Follow Steps in Order)

PARENT/GUARDIAN
I hereby give permission for my son/daughter to drive a private vehicle to the Career and Technical Center, understanding the above conditions, and relieve the HFM BOCES of any responsibility for damage or theft.

______________________________________________________________________   ______________________
Parent/Guardian Signature                     Date

CAREER AND TECHNICAL TEACHER
The above student is applying for a permanent driving permit. Please verify that the student has:

_______ Excellent Attendance – specify if needed ____________________________________________________

_______ Excellent Classroom Behavior – specify if needed _____________________________________________

_______ Satisfactory Grades – specify if needed ______________________________________________________

_____________________________________________________________________       ______________________
Signature of Career and Technical Instructor                     Date

HOME SCHOOL ADMINISTRATOR SIGNATURE _________________________________________ DATE __________________

HFM CAREER AND TECHNICAL CENTER

Arrival Time: __________________________________          Departure Time:_______________________________

Parking Area: __________________________________          Parking Space: ________________________________

Expiration Date ________________________________

CTC PRINCIPAL SIGNATURE _______________________________ DATE ________________