

Career and Technical Center 2755 State Hwy 67 Johnstown, NY 12095 (518) 736-4330 • Fax (518) 736-4331

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:	CTE PROGRAM:	
HOME SCHOOL:	FOR DATE(S):	(Circle one)
PURPOSE:		
	NEED NOTE FROM EMPLOYER	
DRIVER AND VEHICLE INFORMATI	ION (<mark>Please Print neatly)</mark>	
YEAR: COLOR:	MAKE: MODEL:	TYPE:
VEHICLE PLATE NO.		
instructor, student's parent/guardian, a 2. The student will submit the completed 3. The student will not be allowed to driv 4. The student will maintain excellent att 5. Student will have NO passenge 6. If it occurs, the student will report any 7. Student will arrive on time for class. 8. The student will drive slowly and caut 9. The student will park in designated par 10. The student will depart from CTE afte 11. Allow school officials and/or law enfo 12. Violators of any of these regulations	, signed form to the CTE Main Office. The on campus until they have been issued the driving pendance, classroom behavior and satisfactory grades. The in their vehicle at any time. damage to HFM BOCES property to school officials iously, following all traffic safety rules and regulation riving areas. The all buses have left CTE unless directed by school started the personnel to search my vehicle. The all buses have left CTE unless directed by school started the personnel to search my vehicle. The all buses have left CTE unless directed by school started the personnel to search my vehicle.	permit. s. ns. aff to do otherwise.
	esponsible for any vehicle damage or theft. I understand that I am not to drive dge and agree to all of the above terms for the	
Signature of Student:	Date:	

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

<u>EMPLOYMENT</u>		
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	
<u>APPROVAL SIGNATURES:</u> (Follow Steps in Order)		
PARENT/GUARDIAN I hereby give permission for my son/daughter to drive a pri understanding the above conditions, and relieve the HFM E	vate vehicle to the Career and Technical Center, 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 perm	nit. Please verify that the student has:	
Excellent Attendance – specify if needed		
Excellent Classroom Behavior – specify if neede	ed	
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		
CTE PRINCIPAL SIGNATURE	DATE	