Scripps Ranch High School

California Distinguished High School
Golden Bell Award Recipient

STUDENT PARKING APPLICATION

DECAL #_____ Issue Date_____ Issued By_____

NAME_____Grade_____
Last First Middle

Make of Car_____Model_____Year_____Color_____License Plate Number_____

Parking Agreement

Parking on campus is a privilege and the rules involving a vehicle must be complied with at all times. Administration reserves the right to modify the conditions and expectations of this contract (i.e. possible restriction in access to vehicles during school hours).

For the privilege of parking my car on campus:

1. I must obtain a student parking permit and park only in **designated student parking spaces**.
2. To obtain my parking permit I must complete and comply with the following agreement:
   a. I must be at least 16 years of age and have a valid California Driver's License, proper vehicle registration, and proof of insurance coverage
   COPIES OF CURRENT DOCUMENTS MUST BE ATTACHED TO FORM FOR APPROVAL. EXPIRED DOCUMENTS ARE NOT ACCEPTED
   b. I will not loiter in the parking lot before, after or during school hours. The result may be suspension of the parking permit for a time specified by the school administration.
   c. I understand that the speed limit for the parking lot and school grounds is **5 MPH**.
   d. I will keep my vehicle locked at all times.
3. I must display my parking permit from the **rear view mirror** at all times while on campus or **I may be ticketed by the school police.**
4. I will obey all vehicle traffic laws and drive in a courteous/safe manner to and from school as well as on campus.
5. I understand that administration has the right to search my vehicle per the conditions set forth under Administrative Procedure 5065.

I understand that the school will not be held responsible for any loss or damage to my vehicle or its contents while it is parked on campus. I further understand that if I violate the conditions of this agreement, my vehicle may be towed, the permit may be temporarily suspended, and/or I MAY LOSE THE PRIVILEGE OF PARKING ON CAMPUS. **IF YOUR PERMIT IS SUSPENDED MORE THAN TWO TIMES, IT WILL BE REVOKED FOR THE ENTIRE SCHOOL YEAR.**

Signature of Student_____Date_____

Signature of Parent_____Date_____