## Student Parking Permit Application



## \*\*\*PARENT/GUARDIAN MUST SIGN BOTH SIDES OF THIS FORM\*\*\*

Please return completed form and \$25 payment to the Business Office with copies of:

- Current Insurance Card
- Current Vehicle Registration
- Valid Driver's License

Parking on the P.K. Yonge Campus is limited to faculty, staff, students, interns, volunteers and some visitors with official business on our campus. The parking lot will be checked for parking decals and passes. We will not allow people to park at P.K. Yonge and walk to other parts of the University of Florida campus.

Date		Parking Decal #		
Name			Grade	
Address		_City	Zip	
Student's Phone Number (	)	) Tag Number		
Vehicle Make	Model	Year	Color	
Insurance Company	Policy No			
Emergency Contact Inf	ormation			
In case of emergency, please	e contact:			
Name		Relationship		
Home Address		City	Zip	
Telephone Cell ( )		Work ( ) _		
If the above cannot be reach	ed, please contac	t:		
Name		Relationship		
Home Address		City	Zip	
Telephone Cell ( )		Work ( ) .		
Printed Name:		Phone #		
Parent/Guardian Signature: _			Date:	

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## Student Code of Conduct: DRIVING/PARKING ON CAMPUS (This form must be completed each academic year.)

Campus parking is a privilege afforded to students who possess a valid driver's license and show exemplary character and responsibility.

Examples of exemplary character and responsibility include promptness to school and class, consistent attendance, behaviors that are conducive to teaching and learning. In order for students to maintain parking privileges, they must meet the expectations for behavior as described in the Code of Student Conduct. Seniors are afforded preferential parking and this privilege comes with added responsibilities.

In order to be allowed to park on campus, a student must:

- 1. Show valid driver's license
- 2. Provide current insurance card
- 3. Provide current vehicle registration
- 4. Pay \$25 fee

By signing below:

I certify that I have read the "Driving/Parking on Campus" section of the Code of Student Conduct. I understand the expectations described in the of Student Conduct and have reviewed them with my child/parent/guardian.

I understand the responsibilities and rights that pertain to parking privileges at P.K. Yonge.

I accept that parking privileges may be revoked at the discretion of school administration at anv time.

Student Signature:		Date:
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Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_