

## GREENVILLE COUNTY SCHOOLS

### *Application to Operate or Ride in an Automobile During School Time* (Application MUST be completed in full whether or not you are a DRIVER or RIDER)

I request permission to DRIVE a vehicle or RIDE in a vehicle to/from my classes or an extracurricular activity or event at \_\_\_\_\_.

The following is my reason for this request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My parents/guardian and I have read and fully understand the regulations and responsibilities on the reverse of this application. We agree to abide by these regulations and assume all responsibilities in connection with operating or riding in a vehicle.

Vehicles to be registered:

\_\_\_\_\_  
Make of Car                      Color                      Year                      Model                      Tag Number                      Exp. Date

\_\_\_\_\_  
Make of Car                      Color                      Year                      Model                      Tag Number                      Exp. Date

\_\_\_\_\_  
Auto Insurance Company                      Insurance Agent's Name                      Phone Number

\_\_\_\_\_  
Name of DRIVER                      Permit Number                      Permit Date

\_\_\_\_\_  
Signature of Student DRIVER                      Signature of PARENT/GUARDIAN of DRIVER                      Date

If applicant is to be passenger (RIDER) of a Proposed Driver:

\_\_\_\_\_  
Signature of RIDER                      Signature of PARENT/GUARDIAN of RIDER                      Date

\_\_\_\_\_  
Signature of Principal                      Date