

Summerville High School
Parking permit regulations/application
2018 – 2019

I understand that parking is a privilege, not a right!

- Summerville High School is not responsible for any theft and/or damage to your vehicle.
- The parking permit is property of Summerville High School and must be surrendered upon request. **The parking permit cannot be transferred** to other students and must be surrendered upon withdrawal and/or graduation from Summerville High School.
- Summerville High School is a **closed** campus. Once a student is on campus he/she may not leave until the end of the day. The parking lot is not a locker and is off limits.
Exception: School to work or if the student has been signed out.
- Student shall not park in the faculty, handicap or visitor parking spots. **(Vehicle will be towed.)**
- Student shall not park in the staff parking/bus loop between 8:00 am and 4:45 pm. **(Vehicle will be towed.)**
- **Parking passes must be hung from the rear view mirror (in plain view.)**
- Parking lots are school property. All vehicles are subject to search (South Carolina Code of Laws 59-63-1120.)
- Senior parking lot is used by the SHS band after school. All vehicles are to be moved out of the large yellow box no later than 4:30 pm every day. There are no exceptions. **Vehicles that are not moved will be towed at the student/parents expense.**
- **Leaving campus (cutting, skipping) can result in losing your parking pass for the remainder of the year.**
- The permit is **non-refundable** and **non-transferable**.
- **Parking tickets can be issued for violations.**

If this application is approved, I understand that I am subject to all DD2 and Summerville High School rules involving use of automobiles. Any violation on my part could result in my privileges being revoked. Dorchester District 2 and Summerville High School shall not be held responsible for any damages incurred on school grounds.

Print Name _____ **Date** _____
(Student)

Signature _____ **Date** _____
(Student)

I, the parent or legal guardian of the above named student, approve of this application and understand that all privileges will be revoked at the discretion of the school at any time.

Print name _____ **Date** _____
(Parent/Legal Guardian)

Signature _____ **Date** _____
(Parent/Legal Guardian)

2018 – 2019 SHS Parking Pass Application
Fill out this form completely. Do not leave any blanks.

Student's Last Name _____

Student's First Name _____

Grade 9 10 11 12

License Plate # _____

State on License Plate _____

Vehicle Make _____

Vehicle Model _____

Vehicle Color _____

Student's Driver's License Number _____

Insurance Company _____

Insurance Policy Number _____

Last Name on Vehicle Registration _____

First Name on Vehicle Registration _____

Phone Number of Vehicle Owner _____

Phone Number of Student Driver _____

FOR ADMIN USE ONLY

Parking Tag Number _____

Lot Assigned _____

Receipt Number _____