

Charlotte High School

Parking Data



General Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* _____ *State* _____ *ZIP Code*

Home Phone: () _____ Alternate Phone: () _____

Grade: _____ Birth Date: _____

Student's School ID #: _____ Student's Driver License #: _____

Parent / Guardian Name: _____ Work or Cell #: () _____

Vehicle Information

Vehicle Owner: _____ Year: _____

Make: _____ Model: _____

License Tag #: _____ Vehicle Color: _____

Insurance Company Name: _____ Phone #: () _____

Policy #: _____

To obtain your parking permit you must bring the following items with you:

- This completed form
- Copy of student's Driver's License
- Copy of vehicle insurance card
- Copy of vehicle registration
- Parking Agreement signed by Student and Parent
- Incomplete or illegible items will not be accepted.

*One Day Temporary Passes are issued in H Building **before** the start of school*

