



# SOMERSET COUNTY VOCATIONAL & TECHNICAL SCHOOLS

P.O. Box 6350 • 14 Vogt Drive • Bridgewater, NJ 08807-0350 • (908) 526-8900 • Fax: (908) 526-9212 • www.scvths.org

**Hector Montes**  
High School Principal

**Chrys Harttraft, Ed.D.**  
Superintendent of Schools

## STUDENT PARKING AGREEMENT

I understand that I will only park in my assigned spot in the Gym parking lot. If I park in any unauthorized location, I understand I will receive a detention. Continued violations may lead to loss of driving privileges.

## DRIVING/PARKING LOT PROCEDURES

1. All students electing to drive to school must apply for a parking permit **each** school year. Cost is \$40 per school year\*\* (**cash only**). License, registration and insurance card are needed to register.
1. Upon arrival, students need to park and enter school; **Students are not permitted to remain in vehicle or parking lot.**
2. Our school parking sticker must be displayed on the driver side rear window.
3. Speed limit in parking lot is 5 mph.
4. All traffic rules and regulations are in effect in the parking lot.
5. Students may not loiter in parking lot at any time during the school day.
6. Students may not leave school property at any time during the day.
7. It is understood that students bringing their own vehicles to school do so at their own risk. **The school is not responsible for any damage to, theft of, or vandalism of any student vehicle.**

\_\_\_\_\_  
Student Name (Please Print)

\_\_\_\_\_  
CTE Program

\_\_\_\_\_  
Date

=====  
FOR OFFICE USE ONLY

\_\_\_\_\_  
Office Staff Member/Administrator

99900  
Student ID #

\_\_\_\_\_  
Parking Permit #

\_\_\_\_\_  
Date Rec'd

\_\_\_\_\_  
Amount \$ Rec'd

# CAR REGISTRATION

Date \_\_\_\_\_ 20 \_\_\_\_\_

License Plate \_\_\_\_\_ Shop Section A B C

Student's Name \_\_\_\_\_

Address \_\_\_\_\_

Home Telephone \_\_\_\_\_

Car Owner \_\_\_\_\_

Owner's Address \_\_\_\_\_

Insurance Company \_\_\_\_\_

Make <sup>Model</sup> of Vehicle \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_

Check one:  Auto  Truck  Motorcycle

Sending School District \_\_\_\_\_

Student's Signature \_\_\_\_\_

Driver's License # \_\_\_\_\_

Driver's License # Verified By \_\_\_\_\_ CR-07