

A HANDS-ON HOMESCHOOL EXPERIENCE

Application for Permit to Drive

So that my student may take part in educational opportunities, I am permitting him/her to drive his/her vehicle to and from the appropriate location. I certify that the vehicle is insured and that my student can be expected to drive in a responsible manner. I agree that the Enrichment Academy will not be held responsible for any accidents which may occur.

What school year or years does th	is apply? 20 thr	ough 20
Driver's Name: Driver's License No:		
	Address: Telephone No:	
Has driver been in accident or tick	ceted for a moving vio	olation in the last 3 years?
☐ Yes	s 🗌 No	
Explain:		
		_
Vehicle #1		
Make:	Model:	Year:
Vehicle License No.:	No. of Seat	Belts:
Name of Company Vehicle Insure		
		<u>_</u>
37.1 . 1 . 40		
Vehicle #2	M - 1 - 1.	V
Make: Vehicle License No.:	Model:	rear:
Name of Company Vehicle Insure		it beits:
1 7		
		_
Student drivers are responsible for up	odating this form in reg	ards to pertinent driver and vehicle
information. Form is good for one sch		1
Signature of Parent:		
*******	****** C 1 1 1 1 1 C 1	**************************************
**************************************	""" School Use Only	· Data of Approxist
Signature of Director	: Date of Approval:	