

OLYMPIA HIGH SCHOOL

PERMIT TO DRIVE FORM

(THIS PERMIT IS VALID ONLY FOR THE DATES STIPULATED BELOW)

(Name) _____

requests permission to bring vehicle

(Model) _____ (Year) _____

(License No.) _____

To (Internships Site)

Said student understands and agrees that this permit is granted only if said vehicle is used for instructional purposes in the career and technical education program. The student also understands and agrees that he/she drives alone with no passengers. The vehicle shall be transported to your internship site during your regular classroom hours unless otherwise noted. Any violation of the policies herein stated in this permit shall result in immediate termination of future driving privileges. Olympia High School and the the internship site assume no liability for his/her transportation while traveling to and from school or to/from his/her internship site.

Internship Coordinator _____

Student _____

Parent _____

Counselor/Principal _____