



**Hays Consolidated
Independent School District**
Career & Technical Education



**Permission to Drive Privately Owned Vehicle
to Practicum Training Site**

My dependent _____ has my permission to drive a privately-owned vehicle (POV) to reach his/her Practicum Training Site. I understand that bus transportation will not be arranged for the student by the school and that this permission entitles no special parking privileges. The POV must be registered with the high school administration. I fully understand and release responsibility to anyone helping to provide transportation for my child. I understand that I assume full and complete responsibility for any injury or accident that may occur to my student in their travel to and from the Practicum Training Site.

I hereby release and waive all claims that I or my student may have against the Hays CISD, its board of trustees, employees, students, agents and representatives, and all persons participating with the Practicum Training Site in whole or part, from my student's traveling to and from the events attended by the class, or from my student's participation in the activities of the school sponsored event. The release and waiver shall be binding on my heirs, legatees, administrators, and assigns.

Printed Name of Student Driver

Signature of Student Driver

Date

Printed Name of Parent/Guardian

Parent/Guardian Signature

Date

*Please print the name of the passenger(s), if agreed to allow driver permission to have one or more student passengers. A separate agreement must be signed by the passenger's parent/guardian.

First Name

Last Name