

FLOWERY BRANCH HIGH SCHOOL

Parking Permit Application 2023-2024

Student Name: _____ Grade: _____ ID# _____

Address _____

Make: _____ Model: _____ Year: _____

Color: _____ Tag #: _____ Permit # _____
(office use only)

Guidelines

- Students must have a valid Georgia Driver's license.
- Students must present current tag receipt to verify ownership.
- The permit must be clearly displayed on the Drivers side rear window.
- Speeding or reckless driving on school grounds will be considered a violation of parking guidelines.
- Parking in any area other than those specified for student parking is prohibited.
- Students must leave their vehicles upon arriving at school and may not return to their vehicles during the school day unless authorized by an administrator.
- Vehicles are subject to search if there is a reasonable suspicion the student is in possession of an item that is illegal or against school rules.
- Students are not allowed to ride on the outside of any vehicle, including the back of pick up trucks.
- Illegal reproduction of permits is not allowed.
- Using a vehicle to leave campus without school permission is considered cutting class and will be dealt with accordingly.
- Five unexcused tardies to school may result in the loss of parking privileges for one week and discipline will progress as tardies increase.
- During your permit suspension period, if your car is parked on campus you may lose your parking privileges for the remainder of the school year with no refund.
- When a permanent change of vehicle occurs, the student has 3 days to obtain a new sticker.
- When a vehicle other than the one reinstated is driven, notification must be made to Ms. VanParys's or Mrs. Weeks office immediately.
- Initial cost for a permit is \$60.00 per year. After Jan. 1st permits will be \$30.00 for the remainder of the school year. In the event that a student will drive an assortment of vehicles, additional permits, with the same #, can be purchased for \$5.00 upon supplying the registration to the vehicle(s) to be driven.
- Academic honors parking is \$30 for Qualified Seniors.
- Students may not loan or share their parking sticker with anyone.
- Students are subject to having their parking permit REVOKED if he/she cuts in front of the school buses as they exit the parking lot at the end of the school day.

Violation of these guidelines may result in any of the following:

- Loss of permit for a specified amount of time.
- In School Suspension.
- Towing of vehicle
- Suspension from school.

DRIVING TO SCHOOL IS A PRIVILEGE - NOT A RIGHT.

I have read this application and guidelines completely. I agree to abide by these guidelines and understand the consequences of violating them.

Student Signature

Parent/Guardian signature

Cash _____ Check # _____ Date _____



DRUG-TESTING ADMINISTRATION ACKNOWLEDGEMENT/CONSENT FORM

The Hall County Board of Education has authorized mandatory random drug tests for all student-athletes who participate in Georgia High School Association (GHSA) interscholastic athletics and all students who obtain a campus parking permit.

1. The student must present to the school administration this signed consent form, which authorizes the school to administer drug testing and that allows the results of the test to be released to parents or guardians, administrative officials, and the head coach. (Note: A signed consent form is a requirement to obtain a parking permit and for participation in any inter-scholastic activity. Parents and students do not have the option of not participating in the drug-screen program.)
2. Random testing will take place at any time during the year with students chosen through lottery/random selection. Testing consists of providing a urine sample to those representatives of the firm administering the test. School personnel will supervise but will not administer the test. Privacy will be protected. Specimens will be processed for identity and secured to ensure against tampering. Test results will be reported to the school through the proper chain of command. In case of a positive result, the parent or guardian will be notified.

Testing will be done by the Northeast Georgia Forensic/Toxicology Lab under the supervision of the Toxicology Program Manager.

This acknowledgement of administration and consent to allow participation in the random drug-testing program shall remain in effect until revoked in writing.

I acknowledge I have received a copy of the Hall County School System Drug Screening Procedures for Interscholastic Athletics and Permitted Car Drivers.

SIGNATURE(S) OF PARENT(S) OR GUARDIAN(S): _____

DATE: _____

SIGNATURE OF STUDENT- PERMITTED CAR DRIVERS: _____

DATE: _____

- A list of consequences for a positive drug test are available to you from the front office.