

APPLICATION FOR USE OF PRIVATE AUTOMOBILE
(Non-Marshall Students Only)
2021-2022

I hereby apply for the privilege of driving an automobile to the Marshall Academy. If this application is approved, I understand that I am subject to all School Board and local school rules involving the use of automobiles. I understand that any violation on my part will result in my driving privileges being revoked. It is further understood that neither the local school nor the School Board shall be held responsible for damages incurred while on the school grounds or property leased by the school. This permit is non-refundable and non-transferable. IF YOU HAVE A BASE SCHOOL PERMIT YOUR ACADEMY PERMIT IS FREE....IF YOU DO NOT HAVE A BASE SCHOOL PERMIT, THE FEE WILL BE \$67 (Cash or CHECK PAYABLE TO Marshall High School). Students with Free or reduced lunch may call the Academy Office for fees.

PLEASE PRINT

Student Name:	ID:	Grade (circle): 9 10 11 12	
Base School:	Academy Course:	Class Period:	
Legal Owner of Vehicle:	License Plate Number:	State:	Student Phone:
Vehicle Year, Color, Make, Model:	Parent Phone:	Parent Email:	

ACADEMY HANG TAGS MUST BE DISPLAYED IN WINDSHEILD/REAR-VIEW MIRROR WHILE PARKING AT MARSHALL ACADEMY. NON-MARSHALL HS STUDENTS MUST PARK IN THE LOWER LOT NEAR THE FOOTBALL STADIUM. NO ACADEMY HANGTAG COULD RESULT IN WARNINGS OR FINES.

STUDENTS ARE ONLY ALLOWED TO PARK AT MARSHALL ACADEMY DURING THEIR SPECIFIED CLASS TIMES. UNAUTHORIZED VEHICLES ARE SUBJECT TO A WARNING, \$25 FINE OR CAR "BOOT" (\$50 FINE).

POSTED SPEED LIMITS MUST BE FOLLOWED (15 MPH).

STUDENT VEHICLES ON SCHOOL GROUNDS MAY BE SEARCHED WHEN THERE REASONALBE GROUNDS TO BELIEVE THAT THEY CONTAIN ILLEGAL ITEMS OR ARE IN VIOLATION OF THE SR&R. RULES AND REGULATIONS STATED IN THE SR&R MUST BE FOLLOWED AT ALL TIMES ON SCHOOL GROUNDS.

MARSHALL HS/ACADEMY IS NOT RESPONSIBLE FOR STOLEN ITEMS. VALUABLE ITEMS SHOULD NOT BE STORED IN VEHICLES. PLEASE KEEP DOORS LOCKED AT ALL TIMES.

Student Signature _____ Date: _____

Parent Signature _____ Date: _____

I, the parent/legal guardian of the above, named student, approve of this application and understand that all privileges can be revoked at the discretion of the school.

FOR OFFICE USE ONLY:

Payment Amount(circle): Full Base School Reduced Meal Free Meal	Academy Tag #	FCPS Base School Tag #
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