

**BUTLER COUNTY AREA VOCATIONAL-TECHNICAL SCHOOL**  
**TEMPORARY STUDENT DRIVING PERMIT**

Student Name: \_\_\_\_\_ Vo-Tech Course: \_\_\_\_\_  
Date(s) Permitted to Drive: \_\_\_\_\_ Home School: \_\_\_\_\_

The above named student is permitted to drive to Butler County AVTS on the date(s) indicated above provided that a parent/guardian and home school principal have given their approval on this form.

\*\*\*\*\*

**I permit my son/daughter to drive to Butler County AVTS on the above date(s).**

**If applied for and approved, I understand passengers are not to be transported, the only exception is for siblings.**

**Sibling Name/BCAVTS Course** \_\_\_\_\_/\_\_\_\_\_

**Signature of Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*\*\*\*

I approve driving privileges for the student named on this form.

**Signature of Home School Principal/Assistant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*\*\*\*

**I accept the responsibility involved in driving to Butler County AVTS and agree to comply with regulations as prescribed relevant to driving and parking.**

**Signature of Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of BCAVTS Principal/Assistant Director:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*\*MUST BE COMPLETED BY STUDENT\*\***

**VEHICLE MAKE:** \_\_\_\_\_

**MODEL:** \_\_\_\_\_

**PLATE NUMBER:** \_\_\_\_\_

**WHERE VEHICLE IS PARKED?**

\_\_\_\_ **SHOP**

\_\_\_\_ **BACK LOT**

\_\_\_\_ **OTHER (EXPLAIN)**

\_\_\_\_\_

\_\_\_\_\_

**THERE IS A \$1.00**  
**FEE FOR EACH TEMPORARY**  
**STUDENT DRIVING**  
**TAG ISSUED.**

\_\_\_\_ **PAID** \_\_\_\_ **FT** \_\_\_\_ **INITIALS**

**\*\*\*THE STUDENT WILL RECEIVE A TEMPORARY TAG TO DISPLAY ON THE  
REAR VIEW MIRROR WHEN THIS FORM IS COMPLETE\*\*\***

**Procedure to leave the parking lot:**

***Students are NOT permitted to leave the parking lot until the buses have gone. The parking lot attendant will direct students when and how to leave the parking lot.***