

WILCO AREA CAREER CENTER
EXTENDED CAMPUS PERMISSION FORM
DRIVING PERMIT

The following student is enrolled in an extended campus program. Student agrees to abide by the regulations of the site and WILCO Area Career Center.

Student: _____

Reason: _____

Date(s) of Participation: _____

Location of Extended Campus: Wilco Area Career Center – Romeoville, IL

Transportation Arrangements: Student will be a DRIVER

Names of student passengers authorized to travel to and from off campus site with above driver.
Signature of Passenger's parent/guardian authorizes transportation to and from off campus site with fellow classmate.

Passenger 1 Student's Name

Passenger 1 Parent/Guardian Signature

Passenger 2 Student's Name

Passenger 2 Parent/Guardian Signature

Passenger 3 Student's Name

Passenger 3 Parent/Guardian Signature

Passenger 4 Student's Name

Passenger 4 Parent/Guardian Signature

Parent/Guardian of driver is responsible for assuring driver has a valid driver's license and appropriate vehicle insurance coverage.

Wilco Instructor

Date

Wilco Assistant Director

Date

Home School Administrator

Date

I agree to accept full liability of and responsibility for my son/daughter's participation in WILCO extended campus.

Driver's Parent/Guardian Signature

Date

WILCO Area Career Center provides equal employment opportunities for all persons, and equal educational opportunities for all students, without regard to race, color, religion, creed, national origin, gender, age, ancestry, physical or mental handicap or disability, or other characteristics protected by law.

White-Wilco Office

Yellow-Student

Pink-High School