Miami Community Charter High School

18720 SW 352nd Street Florida City, FL 33034, Tel: 786. 243.9981 www.mccsedu.org

2018-2019 **Student Parking Application**

Please print the following information and attach copies as stated below.

THIS APPLICATION AND REQUIRED COPIES MUST BE TURNED INTO THE MAIN OFFICE BY TUESDAY, SEPT. 4. THERE WILL BE NO EXCEPTIONS.

If you have been selected you will be notified by Tuesday, Sept. 11th. You will then be required to bring a check made out to Miami Community Charter School, for \$10 to Ms. Acosta's office no later than Friday, Sept. 20th at 2:35 pm, where you will be given a decal and an assigned parking space.

Name
ID Number
Florida Driver's License Number
Name of Insurance Company

Policy Number _____

You must attach copies of the following items:

- Driver's License (Not Restricted) front and back, COLOR COPY.
- Proof of Insurance, COLOR COPY.
- Registration of the car you will be driving to school.
- Color picture of the car (Tag included) you will be driving to school.

DO NOT WRITE IN THIS SECTION

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WEIGHTED G.P.A. _____ UNWEIGHTED G.P.A. _____

DRIVER'S LICENSE_____

INSURANCE CARD

REGISTRATION COLOR PICTURE OF CAR (TAG)