



Christian Academy Schools
2151 W. Russell Rd. Sidney, Ohio 45365
Phone 937-492-7556 FAX 937-492-5399

Student Driving Permit

Name _____ Date of Birth _____

Address _____ City _____

Phone () _____

Grade _____ Social Security Number _____

Driver's License Number _____

Insurance Company _____

Make of Vehicle _____ Year _____

Vehicle License Number _____

A copy of the student's driver's license and a copy of insurance card MUST be on file in the office.

Student's Signature _____ Date _____

Parent's Signature _____ Date _____

Principal's Signature _____ Date _____

- Copy of Driver's License
- Copy of Insurance Card
- Parent's Signature
- Student's Signature