



K. Erik Swanson, Ph.D.  
Superintendent of Education

# GEORGE WASHINGTON HIGH SCHOOL

*“Home of the Mighty Gecko Warriors”*

Physical Address: 298 Washington Drive Mangilao Guam, 96913  
Mailing: 501 Mariner Ave, Barrigada, Guam 96913  
Telephone: (671) 734-2911 | Website: www.gwhsgeckos.com | Email: gwhs@gdoe.net

Accredited by the Western Association of Schools and Colleges, 2024-2030



Dexter Fullo  
Principal

## STUDENT PARKING PERMIT APPLICATION

Last Updated July 2024

<b>Student Information</b>	<b>Last Name</b>		<b>First Name</b>		<b>MI</b>
	<b>Date of Birth</b>		<b>Age</b>	<b>Part Time Enrolled</b> ___ Yes ___ No	
	<b>Driver’s License #</b>			<b>Expiration Date</b>	
<b>Contact Information</b>	<b>Home</b>		<b>Cell</b>		<b>Work</b>
<b>Vehicle Information</b>	<b>Year</b>		<b>Make</b>		<b>Model</b>
	<b>Color</b>		<b>License Plate #</b>		
<b>Insurance</b>	<b>Insurer</b>		<b>Policy #</b>		<b>Expiration Date</b>
<b>Registration</b>	<b>(Registration) Expiration Date</b>				

### Required Documents:

The following **original** documents must be *presented* upon submission of this application. *Copies should be made* to accompany this application.

1. Updated Vehicle Registration with student’s name listed as an insured operator of the vehicle
2. Updated Insurance Policy
3. Student’s Valid Driver’s License (Permits will not be accepted)
4. Parent(s)/Guardian(s) Valid Identification
5. \$15.00 Payment *per Semester*

***Parking Permits MUST be renewed EVERY SEMESTER***

<b>Parent/Guardian Name</b>	<b>Contact #</b>	<b>Contact #</b>
<b>Email Address:</b>		
<b>Parent/Guardian Name</b>	<b>Contact #</b>	<b>Contact #</b>
<b>Email Address:</b>		

Eric Dela Cruz  
AP, Academic Affairs

Christopher Castro  
AP, Student Support

Noshista Delgado  
AP, Special Programs

Joni Serisola  
AP, Student Life & Attendance

Lina Taimanglo  
Administrative Officer

*Our Purpose is to Provide Our Students with the Skills and Knowledge they Need to Make Wise Decisions and Be Good Productive Citizens.*



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## PARENT/GUARDIAN PERMISSION

(Parent/Guardian MUST be registered owner of vehicle and the insurance carrier)

I, \_\_\_\_\_ Parent/Guardian of \_\_\_\_\_ give my child permission to drive the above listed vehicle to and from the George Washington High School campus. I will inform the school if there are any changes made to the insurance policy or registration information. I understand that the parking permit/decal issued for this vehicle can only be used for this vehicle and if there is another vehicle to be used, I must register that vehicle also and use the assigned permit/decal issued for such vehicle(s). All decals must be placed on the registered vehicle dashboard and visible through the windshield I have reviewed all the rules and regulations with my child We understand that the vehicle is subject to be searched by school authorities while on campus. I also understand that GWHS is not responsible for any damages, accidents, injuries, or theft to the vehicle with my child and/or other parties involved. We understand that this is a privilege, and any violation of the rules or regulations may result in my permit(s) being revoked permanently.

\_\_\_\_\_  
Student Name / Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Name / Signature

\_\_\_\_\_  
Date

### For Official Use Only:

( ) Approved ( ) Disapproved

Decal Number: \_\_\_\_\_

Receipt Number: \_\_\_\_\_

\_\_\_\_\_  
School Official Name/Signature.                      Date

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AP, Academic Affairs

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