VOLUNTEER DRIVER INFORMATION SHEET

I. Driver:

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Name	Date of Birth
Address	Phone #
City	Zip Code
Driver License #	
Vehicle that will be used:	
Name of Owner	Year & Make
Owner Address	Model
	License Plate
Registration Expires	Number of Seats with Belts

If more than one vehicle is to be used, requested information must be provided for each vehicle.

III. Insurance Information:

When using a privately owned vehicle, the insurance coverage is the limit of the insurance policy covering that specific vehicle.

Insurance Company	
Policy Number	
Expiration Date	
Liability Limits of Policy*	

*Please note: As of August, 2003: The minimal, acceptable liability for privately owned vehicles is \$250,000/\$500,000. It is recommended that parents consider expanding coverage to \$500,000.00 CSL (Combined Single Limit). The additional coverage is considered appropriate protection and, generally, inexpensive to purchase.

IV. Certification:

I hereby certify that the information given on this form is true and correct to the best of my knowledge. I understand that as a volunteer driver, I must be 21 years of age or older, hold a valid driver's license, and have the required insurance coverage in effect on any vehicle used to transport students.

(Signature)

(Date)

It is recommended that a photocopy of the driver's valid driver's license and auto insurance policy be attached to this form.