## VOLUNTEER DRIVER INFORMATION SHEET

## L Driver:

	Name	Date of Birth
	Address	Phone #
	City	Zip Code
	Driver License #	
Ш.	Vehicle that will be used:	
	Name of Owner	Year & Make
	Owner Address	_Model
		License Plate
	Registration Expires	Number of Seats with Belts
	Moving Violations within the last 3 years	(explain on separate sheet)
lf m vehi	ore than one vehicle is to be used, request cle.	ted information must be provided for each
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.