

**Appendix J:**

**Volunteer Driver Information Sheet**

**Driver**

Name: \_\_\_\_\_ Telephone \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Birth Date: \_\_\_\_\_ SS#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Driver's License#: \_\_\_\_\_

**Vehicle**

Owner: \_\_\_\_\_ Registration # \_\_\_\_\_

Address: \_\_\_\_\_

Year/Make/Model: \_\_\_\_\_  
\_\_\_\_\_

**Insurance** *(When using a privately owned vehicle, the insurance coverage of that vehicle is primary.)*

Insurance Company

\_\_\_\_\_

Policy Number

\_\_\_\_\_

Expiration Date

\_\_\_\_\_

Liability Limits\*

*\*Please note: The minimal acceptable liability for privately owned vehicles is a minimum of \$100,000 Comprehensive Coverage / \$300,000 Liability Coverage.*

I maintain a minimum of \$100,000 Comprehensive Coverage / \$300,000 Liability Coverage.

**Certification**

I 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.

\_\_\_\_\_

Date Signature