

VOLUNTEER DRIVER INFORMATION SHEET

I. Driver:

Name _____ Date of Birth _____

Address _____ Phone # _____

City _____ Zip Code _____

Driver License # _____

II. 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 limits 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.

Office Use Only

Background Check Form Turned In

Attended Protecting God's Children Workshop