

## 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: 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.*

**Background Check Form Turned In**