

VOLUNTEER / EMPLOYEE DRIVER INFORMATION SHEET

I. Driver:

Name: _____ Date of Birth: _____

Address: _____ Phone: _____

Driver's License #: _____ Expiration: _____

II. Vehicle that will be used: (Information must be provided for each vehicle.)

Name of Owner: _____ Year and Make: _____

Address of Owner: _____ Model: _____

License Plate #: _____ Registration Expires: _____

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 limit for privately owned vehicles is \$500,000 CSL (Combined Single Limit). Due to some insurers limitations, limits if \$250,000 per person//\$500,000 per occurrence are acceptable.

IV. 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 / employee driver, I hold a valid driver's license and have the required insurance coverage in effect on any vehicle used to transport students, co-employees, service recipients and / or act on behalf of the church or related entities.

Signature

Date