

## VOLUNTEER DRIVER INFORMATION SHEET

1. Driver Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

2. Vehicle(s) that will be used:

Vehicle 1	Vehicle 2
Owner: _____	Owner: _____
Owner's Address: _____ _____	Owner's Address: _____ _____
Year and Make: _____	Year and Make: _____
Model: _____	Model: _____
License Plate #: _____	License Plate #: _____
Registration Expiration: _____	Registration Expiration: _____
Inspection Expiration: _____	Inspection Expiration: _____
# of Operational Seatbelts: _____	# of Operational Seatbelts: _____

**If more than one vehicle will be used, requested information MUST be provided for each vehicle.**

**Please turn over to complete insurance information.**

3. 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 \$50,000/\$100,000.

4. 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 in any vehicle used to transport students. If any of the above information changes during the school year, I will notify the school office.

Signature of Driver: \_\_\_\_\_

Signature of Insured, Registered Owner: \_\_\_\_\_

Date: \_\_\_\_\_