

**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 limit of the insurance policy covering that specific vehicle.

Insurance Company \_\_\_\_\_  
 Policy Number \_\_\_\_\_  
 Expiration Date \_\_\_\_\_  
 Liability Limits of Policy\* \_\_\_\_\_

**\*Please note:** As of March 2004: 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.