

Volunteer Driver Information Sheet

I. Driver:

Name: _____ Date of Birth: _____

Address: _____ SSN: _____

_____ Phone: _____

Driver's License # _____

II. Vehicle that will be used:

Name of Owner: _____ Year/Make: _____

Address: _____ Model: _____

_____ License Plate: _____

Registration Expires: _____ Inspection Expires: _____

If more than one vehicle is to be used, 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 limit for privately owned vehicles is \$100,000/\$300,000.

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 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)