

**DRIVER INFORMATION SHEET
FOR EVENTS OFF SCHOOL PREMISES**

DRIVER (SUBMIT A COPY OF VALID DRIVER'S LICENSE)

1. Name _____ Date of Birth _____
Address _____ SSN#: _____
_____ Phone#: _____
Driver License # _____ Reg. Exp. Date: _____

VEHICLE TO BE USED

2. Name of Owner: _____ Model: _____
Owner Address: _____ Vehicle Make: _____
(If different from above) _____ Vehicle Year: _____
License Plate #: _____ Expiration Date: _____
of Child Safety Seats Available: _____ # of Passenger Seat and Lap belts: _____

If more than one vehicle is to be used, the aforementioned information must be provided for each vehicle.

INSURANCE INFORMATION (ATTACHED PROOF OF INSURANCE SHOWING LIABILITY LIMITS)

3. When using a privately-owned vehicle, the insurance coverage is the limit of the insurance policy covering that specific vehicle.

Insurance Company _____

Policy #: _____ Expiration Date of Policy: _____

Liability Limits of Policy: _____

NOTE: The minimal, acceptable liability limit for privately-owned vehicles is \$100,000/\$300,000.

CMG BACKGROUND:

FOR OFFICE USE ONLY

_____ Cleared

_____ Not Cleared

_____ CHECKED BY (Please write clearly)

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, possess a valid driver's license, have the proper and current license and vehicle registration, and have the required coverage in effect on any vehicle used to transport youth. **I am familiar with the state law requiring that children are required to ride in child restraints (including boosters) until they are age eight or are 4'9" tall. (Vehicle Code #27360.5) January 2012**

Signature

Date

It is strongly recommended that children 12 years and under do not sit in the front seat of cars equipped with air bags. (May 1998)

(PLEASE COMPLETE BOTH SIDES OF THIS FORM)

**ST. MARY, STAR OF THE SEA PARISH SCHOOL
VOLUNTEER DRIVERS GUIDELINES**

1. **All drivers must submit a copy of a valid driver's license AND proof of insurance showing minimal liability limited of \$100,000/\$300,000 to the school office.**
2. All vehicles transporting students must have one lap AND shoulder seat belt per child.
3. Drivers must carry permission forms during the trip in order to have access to necessary emergency information. All forms should be returned to the teacher/coach following the trip/activity.
4. Drivers agree to transport children directly to and from the prearranged destination. Side trips are not allowed.
5. Siblings are not permitted to go along on field trips.
6. Purchasing snacks and articles for the children you supervise is not recommended. It causes hurt feelings with the other children.
7. Drivers should arrive 15 minutes prior to the scheduled departure time in order to prevent delays.

My vehicle has (number)_____ lap **AND** shoulder seat belts to safely hold (number)_____ of children. NOTE: It is strongly recommended that children 12 years of age and under do NOT sit in the front seat of vehicles equipped with passenger seat air bags.

I have read and understand the "Driver Guidelines" listed above and I am willing to fulfill those requirements.

Child's Name

Grade

Date

Parent/Guardian Signature

Telephone #

(PLEASE COMPLETE BOTH SIDES OF FORM)