

ACTIVITY DRIVER CERTIFICATION FORM

Pursuant to Policy 900.7, parents, legal guardians, or other volunteers who volunteer to drive students to a school activity are required to complete this form.

Driver: Parent/Guardian Adult Volunteer

Vehicle Information – Please attach a copy of driver’s license

Driver Name _____

Address _____ Phone _____

Vehicle Year _____ Make _____ License Plate _____

Registration Expires _____ Seat Capacity _____ No. Seat Belts _____

Insurance Information – Please attach a copy of insurance card

Insurance Carrier _____

Policy Number _____ Expiration Date _____

Liability Limits of Policy _____

The minimum acceptable liability limit for privately owned vehicles is either split limits of \$100,000 per person and \$300,000 per occurrence for bodily injury liability and \$100,000 per occurrence for property damage liability; or a combined bodily injury and property damage per occurrence liability limit of \$300,000.

Agency Name _____

Name of Agent _____ Telephone Number _____

Driver Certification Statement

I certify that I have not been convicted of reckless driving or driving under the influence of drugs or alcohol within the past five years.

I certify that the information given above is true and correct. I understand that if an accident occurs, my insurance coverage shall bear primary responsibility for any losses or claims for damages.

Name (print) _____ Date _____

Signature _____

Adopted: 4/1/10
Reviewed: 10/1/15, 10/6/16, 1/6/22