

Christ the Teacher

CATHOLIC SCHOOL

DRIVER

Name _____

Date of Birth _____

Address _____

Home Phone _____

Cell Phone _____

Driver's License # _____

Date of Expiration _____

VEHICLE THAT WILL BE USED

Name of Owner _____

Model of Vehicle _____

Owner's Address _____

Make of Vehicle _____

Year of Vehicle _____

License Plate # _____

Date of Expiration _____

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

INSURANCE INFORMATION

Insurance Company's Name _____ Policy # _____

Liability Limits of Policy* _____ Date of Policy Expiration _____

(*Please note: The minimal, acceptable liability limit for privately-owned vehicles is \$100,000/\$300,000)

Agent's Name _____ Agent's Phone # _____

In order to provide for the safety of our students or other members of the parish/school and those we serve, we must ask each volunteer driver to answer the following questions:

- | | TRUE | FALSE |
|--|--------------------------|--------------------------|
| 1. I have NOT had a conviction for an infraction involving drugs or alcohol (such as driving under the influence or driving while intoxicated) in the last three years. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. I have NOT had two or more convictions for an infraction involving drugs or alcohol (such as driving under the influence or driving while intoxicated) in the last seven years. | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. I have had no more than three moving violations or accidents in the last three years. | <input type="checkbox"/> | <input type="checkbox"/> |

PLEASE BE AWARE THAT AS A VOLUNTEER DRIVER, YOUR INSURANCE IS PRIMARY.

CERTIFICATION

I certify that the information given on this form is true and correct to the best of my knowledge. I understand driving for Church ministry is a profound responsibility and I will exercise extreme care and due diligence while driving. 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 insurance coverage in effect on any vehicle used to transport students. I agree that I will refrain from using a cell phone or any other electronic device while operating my vehicle.

Signature _____

Date _____



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