

**St. Edith School**  
**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 \_\_\_\_\_ Inspection Expires \_\_\_\_\_

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: The minimal, acceptable liability for privately-owned vehicles is \$100,000/\$300,000. It is recommended that parents consider expanding coverage to \$500,000 CSL (Combined Single Limit).

**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.