## DRIVER INFORMATION SHEET

<u>Driver</u>	
Name	Date of Birth
Address	Home Phone
	Cell Phone
Driver's License#	Date of Expiration
Vehicle That Will Be Used	
	Model of Vehicle
Address of Ourser	Make of Vehicle
Address of Owner	Voor of Vohicle
License Plate #	Date of Expiration
If more than one vehicle is to be used, the aforemention	ned information must be provided for each vehicle.
Insurance Information	
Insurance Company's Name	Policy #
Liability Limits of Policy*	Date of Policy Expiration
	t for privately-owned vehicles is \$100,000/\$300,000)
Agent's Name	
In order to provide for the safety of our stud	dents or other members of the parish/school
and those we serve, we must ask each volu	nteer driver to answer the following questions:
	TRUE FALSE
I have NOT had a conviction for an info	
alcohol (such as driving under the influ	
intoxicated) in the last three years.	delice of driving wine
Internotion, in the last times yours.	
2. I have NOT had two or more conviction	ns for an infraction involving
drugs or alcohol (such as driving unde	•
while intoxicated) in the last seven year	
in the intexted of in the fact seven year	
3. I have had no more than three moving	violations or accidents
in the last three years.	
Please be aware that as a volunteer of	Iriver, your insurance is primary.
0.000.00	
Certification	
I certify that the information given on th	nis form is true and correct to the best of my
	th ministry is a profound responsibility and I will
•	ence while driving. I understand that as a
	age or older, possess a valid driver's license,
	d vehicle registration, and have the required
	ele used to transport students. I agree that I will
retrain from using a cell phone or any oth	er electronic device while operating my vehicle.
Signature	Date
I	