



GROTON AREA SCHOOL DISTRICT 06-6

POLICIES AND REGULATIONS

NEPN Code: EEADA-AA

Volunteer Driver Form

Name of driver: _____

Address: _____

Driver's License Number: _____ State Issued: _____

Year, make, and model of vehicle: _____

License plate number: _____

Insurance company name: _____

Agent's name: _____

In order to provide for the safety of our students we must ask each volunteer to list all accidents or moving violations you have had in the last three years.

Please be aware that, as a volunteer driver, your insurance is primary in the case of an accident.

Thank you for helping us with our transportation needs.

Volunteer Driver Signature

Date

Athletic Director/Principal/Superintendent Signature

Date

The volunteer driver's signature on this form certifies that the information is correct.

[Added: 01/14/13] [Amended 07/14/14]