School			

STUDENT VOLUNTEER DRIVER INFORMATION AND AUTHORIZATION

Name DOB					
Surname Given YY/MM/DD					
AddressPostal Code					
Driver's Licence No Class (002 or better)					
DRIVING HISTORY: Years of driving experience					
List driving restrictions					
Elot arrying restrictions					
List any Motor Vehicle Act offenses for which you have been convicted.					
DRIVER'S DECLARATION					
IDENTIFICATION VEHICLE#1 VEHICLE#2 VEHICLE #3 • I will be driving a vehicle(s) owned by					
who has given me permission to drive					
the vehicle for this purpose.					
• Vehicle owner's signature (authorizing use)					
Phone# (Home)Phone# (Business)					
The vehicle licence number is					
and is insured for a MINIMUM of					
\$1,000,000 Third Party Legal Liability					
This vehicle has (indicate #) operating # # #					
seatbelts.					
☐ I have a valid B.C. driver's licence.					
☐ I will carry only <u>ONE</u> passenger and drive within SD61, SD62, SD63 only.					
□ I have an "N" sign attached to my car.					
☐ I agree to wear a seatbelt myself, and require my passenger to wear a seatbelt.					
☐ I agree to operate the vehicle safely and in a legal manner.					
 □ I have attached a photocopy of my vehicle registration/insurance and driver's licence. □ If the vehicle to be used is equipped with an air bag on the passenger side, then no student under the age of 13 shall travel in the 					
front seat.					
I hereby certify that the information given in this application and the documentation attached is correct, complete, and true in every					
respect. Further, I agree to inform the school administrator of any changes to the information contained in this application during					
the year.					
Student's Signature Date Phone #					
I approve of my son/daughter/student transporting students in their/my vehicle.					
Powert / Country / Country					
Parent/Guardian's Signature Date					
PRINCIPAL'S DECLARATION					
I have reviewed this information and the attached documentation. In accordance with Regulation 1241 and my review,					
I:					
☐ Authorize ☐ Do not authorize this applicant					
Principal's Signature Date					

NOTE: This information, which will be stored in a secure area, is being collected pursuant to Section 26 (c) of the Freedom of Information and Protection of Privacy Act. It will be used for the Volunteer Driver Program only.