



## **DRIVER INFORMATION FORM**

PARISH	CITY
DRIVER'S INFORMATION	
Name	Date of Birth
Address	Social Security #
Phone #	
Driver's License #	Expiration Date
VEHICLE THAT WILL BE USED	
Name of Owner	Vehicle Model
Address of Owner	Vehicle Make
Vehicle Year	
License Plate #	Expiration Date
Registration Expiration Date [If more than one vehicle is to be used, the aforementioned information must be provided for each vehicle]	
INSURANCE INFORMATION	
Insurance Company	
Policy #	
Date of Policy Expiration	
Liability Limits of Policy	
Please note – The minimal, acceptable liability limit for privately owned vehicles is \$100,000/300,000.	
CERTIFICATION  I 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, 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.	
Signature	Date