

NICASIO SCHOOL DISTRICT

Administrative Rules and Regulations

Series 6000: Instruction

Form 6153D

Field Trip Driver Information

Driver's Name: _____

Please contact me to drive on field trips for _____ classroom.
(print teacher's name)

Thank you for volunteering your services to assist Nicasio School in transporting children on school-sponsored field trips. Prior to using a private automobile for an educational field trip, the driver must complete, sign, and keep this form on file in the District office. This form must be completed at least once each school year and each time information on the form changes.

1. DRIVER INFORMATION

Driver (circle one): Employee Parent/Guardian Other Volunteer

Name: _____ Date of Birth: _____

Address: _____ Driver's License #: _____

Expiration Date: _____

Telephone: () _____ Cell: () _____

2. VEHICLE INFORMATION

Make/Model: _____ Year: _____

License Plate #: _____ Registration Expiration: _____

Seating Capacity _____ *Don't include driver's seat or front passenger seat if it has an airbag.

Name of Vehicle Owner (if different from Driver): _____

Owner's Address and Phone (if different): _____

3. INSURANCE INFORMATION

Insurance Company: _____ Policy No.: _____

Telephone: () _____ Expiration Date: _____

REQUIRED LIMITS: \$100,000/\$300,000 Bodily Injury and \$25,000 Property Damage

Signature: _____ Date: _____

Please return this completed form to the school office, along with the following:

- A photocopy of the declaration page of your Insurance Policy
- A photocopy of your Driver's License