

VOLUNTEER DRIVER FORM _____- SCHOOL YEAR

Any adult volunteering to drive students from or for Oakdale Academy is required to submit this completed form to the school, along with the following information:

_____ Photocopy of your current, non-expired driver's license, front and back

Photocopy of your current, non-expired insurance card, front and back

Please Note:

- A new Volunteer Driver Form must be filled out at the <u>beginning of each new academic year</u>. All info will be destroyed at the end of school year.
- If two parents in the same household are volunteering to drive, one form may be used as long as copies of license and insurance are submitted for both drivers and both signatures are present.
- You must submit a form, even if you are only driving your own child on a field trip, as emergency situations arise and may require having your information on file.

I. DRIVERS:

see back			
City	StateZip		
Vehicle Owner's Address			
If vehicle owner address is different from	Household Address, please list below:		
Registration Expiration Date	Total Working Seatbelts (include driver)		
MakeModel	License Plate #		
Name of Owner	Year		
<u>VEHICLE #2</u> :			
Registration Expiration Date	Total Working Seatbelts (include driver)		
MakeModel	License Plate #		
Name of Owner	Year		
VEHICLE #1:			
II. VEHICLE INFORMATION:			
Driver 2 License #	Cell Phone		
Driver 2 Name	Date of Birth		
Driver 1 License #	Cell Phone		
Driver 1 Name	Date of Birth		
City	StateZip		
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Oakdale Academy • 3200 Beacham Drive, Waterford, MI 48329 • 248-481-9039 Volunteer Driver Form_January 2022

III. DRIVER INFORMATION:

Have you been in an accident in the last three years? _____ NO ____ YES (If yes, attach details of the accident.) Have you been ticketed for moving violations in the last three years? _____ NO ____ YES (If yes, attach details of the accident.)

IV. DECLARATION:

My signature below, certifies that I will:

- Obey all traffic laws.
- Maintain the minimum insurance coverages required on vehicles listed.
- Understand that my insurance is responsible for any liability, the Oakdale Foundation/Academy insurance will take effect only after my personal auto insurance limits are exhausted.
- Inform Oakdale Academy of any change in the information provided on this form.
- Require all students riding in my vehicle(s) to wear individual safety belts (no doubling).
- Check that my vehicle is in safe operating condition (brakes, tires, lights, etc.).
- Notify the school ASAP if I wish to be removed from the Approved Driver List.
- Certify that I possess a valid, State of Michigan Driver's License (or list other state _____).

Date
Date

V. ADMINISTRATOR'S APPROVAL:

Not ApprovedApproved	Admin Initials	Date:
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