

OUR LADY OF SORROWS SCHOOL

VOLUNTEER DRIVER FORM

Name of Driver:	Address:
Driver's License #:	Province Issued:
Year, Make & Model of Vehicle:	
Insurance Company's Name:	
Liability Limits (Minimum of \$1,000,000 Required):	

Please provide a copy of Proof of Insurance and Driver's License for our files.

In order to provide for the safety of those we serve, we ask each volunteer to answer the following questions:

	True	False
1. I have NOT had a conviction for an infraction involving drugs or alcohol (such as driving under the influence or driving while intoxicated) in the last three years.		
2. I have NOT had two or more convictions for an infraction involving drugs or alcohol (such as driving under the influence or driving while intoxicated) in the last seven years.		
3. I have had no more than one moving violation or accidents in the last three years.		

Please be aware that as a volunteer driver, your personal automobile insurance is primary.

Thank you for helping us with our transportation needs.

Certification

I certify that the information given on this form is true and correct to the best of my knowledge. I understand driving for Church Ministry (OLS School students) is a profound responsibility and I will exercise extreme care and due diligence while driving. 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. I agree that I will refrain from using a cell phone or any other electronic device while operating my vehicle. I will use an 11-15 passenger Van only when I have approval from the Diocesan/Eparchy Chancery offices or School Principal.

Volunteer Driver Signature

Date