



Student Transportation in Private Vehicle/Common Carriers
(Proof of Vehicle Liability Insurance for Volunteers)

Dear _____,

You have agreed to transport students from Holly Academy to a field trip function or for some other school-approved purpose. Please be aware that in the event of an accident, your insurance will provide primary coverage. In order to serve as a volunteer driver you will be required to provide primary coverage. Your insurance must meet or exceed minimum requirements as established by the state of Michigan.

In addition, it is required that you inform us as to the current status of your driver's license. It is Holly Academy's discretion based on the information supplied as to whether you will be allowed to transport students. By signing this form, you are also allowing Holly Academy to contact your insurance company for verification of information.

Please COMPLETE the following information, providing information requested. SIGN where indicated and RETURN to the school four (4) working days PRIOR TO THE DATE OF THE EVENT.

EACH CHILD MUST BE IN A SEAT BELT

Insurance Company Name: _____

Agent's name and address: _____

Policy number: _____ Expiration date: _____

Policy limits: _____ **Number of Students in vehicle** _____

Date of birth: _____ Driver's License No.: _____

Has your license been revoked or suspended within the last 12 months? _____

If yes, explain: _____

Is your license valid at this time: _____

Signature: _____ Date: _____

Address: _____ Daytime phone: _____

Parent/Volunteer name: _____
(as it appears on your driver's license)

Return form to your child's homeroom teacher. If you do not have required coverage, you will not be allowed to transport students. (Insurance companies may increase coverage for specific dates.)

All chaperones MUST have completed the necessary paperwork and training to be eligible to chaperone.