



Volunteer Driver Form

Parkway Christian School 14500 Metropolitan Parkway
Sterling Heights, MI 48312 (586) 446-9900

_____ school year

Each potential driver must submit a separate form. **A current copy of your driver's license and proof of auto insurance must be attached.** Parents are responsible for updating their vehicle insurance information as it renews

Please fill out one form per driver

Name as it appears on Driver's License

Driver's License # _____ Exp.

Date _____

Home Phone _____ Cell

Phone _____

Number of functioning seatbelts _____

Please answer the following:

Have you been ticketed for a moving violation within the last 3 years? _____

Have you been convicted for DWI/ DUI or had your license suspended for any reason? _____

Please list the names and grade levels of your students currently enrolled at Parkway Christian School

First Name	Last Name	Current Grade

Requirements for Drivers

- I possess a valid Driver's License for the State of Michigan or in the state of _____
- I will contact my insurance agent to ascertain any policy limits or exclusions that may affect my ability to meet qualifications for a volunteer driver
- I understand that in the case of any type of accident, injury or vehicle damage, the school liability insurance does not provide primary or direct insurance on my vehicle
- I will adhere to all state laws that govern transportation of passengers/children
- I will obey all traffic laws as posted

Signature _____ **(copy of DL and insurance attached)**

Upon receipt of this form, Parkway Christian School retains the right to contact your insurance provider and the State of Michigan to verify the accuracy of the information provided.

OFFICE USE ONLY

Date Received _____ Date Approved _____ Approved By _____