



Greenwood School Driver Statement Form
2016-17 School Year

*Please fill out this form and initial where noted. Then, **return this completed form along with a copy of your driver's license and proof of automobile insurance (which includes liability coverage)**, prior to or on the first day of school if you ever intend to drive for a field trip or a Greenwood School event. Please fill out a separate form for each adult driver in your household.*

Driver's Name _____ Driver's License # _____
Vehicle License # _____ Driver's Insurance Carrier _____
Policy # _____
Driver's Signature _____ Date _____

Note: Greenwood School carries Hired/Non-Owned Auto Insurance.

The policy is secondary coverage. Individuals who drive children or conduct business for the school using their own automobiles must have their own coverage. The school's coverage is secondary; it covers above and beyond the minimum requirements up to \$1,000,000.

All parents, volunteers, and school personnel operating their own vehicles to transport students on officially authorized school business or related school activities must have this statement on file with the school prior to driving. **All drivers must read and initial the following:**

1. The individual's own automobile liability insurance will always be considered as the primary coverage. The school carries secondary automobile insurance coverage, which covers above and beyond the driver's insurance. ____ (Initial)
2. School personnel, parents and volunteers who transport students must be at least 21 years of age. Please contact the office if an exception to the age requirement is desired. ____ (initial)
3. Students may not ride in the back of pick-up trucks, including those with camper shells. ____ (Initial)
4. No smoking is allowed in any vehicle while students are being transported. ____ (Initial)
5. The following minimum requirements must be met by the parents, volunteers, and school personnel transporting students on official school functions:

Liability Insurance Coverage:

Bodily Injury	\$15,000/\$30,000	____ (initial)
Uninsured Motorist	\$15,000/\$30,000	____ (initial)
Property Damage	\$10,000	____ (initial)

6. Driver's records are public records. I acknowledge that the school may check my driving record with the Department of Motor Vehicles. ____ (initial)
7. I certify that the automobile listed is regularly maintained and kept in good operating order. ____ (initial)
8. I certify that my vehicle has with one safety belt for each student riding in my vehicle. ____ (initial)
9. I understand and agree that I am responsible for keeping this insurance information current and correct. I understand that I am responsible for notifying the school immediately if changes of any kind are made to the automobile insurance policy. This includes, but is not limited to cancellation of the policy. ____ (initial)