

Pleasant Hill Christian School **2017-2018**
Driver Authorization Request Form

All drivers transporting students at the request of Pleasant Hill Christian School must:

1. Complete this form **each year**.
2. Be a school parent, or 25 years of age or older.
3. Have \$100,000/\$300,000 of liability insurance.
4. Attach a copy of **current driver's license** and a copy of your **current insurance declaration** of coverage to this form. (See attached example)

Please return this form to the main office. Approved drivers will be notified and added to the school's approved driver list. Please print neatly or type.

Section I – Volunteer Driver Information
(Complete the spouse information only if spouse will also be driving for PHCS.)

Name _____	Spouse _____
D/L # _____	D/L # _____
Expiration Date _____	Expiration Date _____
Phone (H) _____	Phone (Work - Mr.) _____
	Phone (Work - Mrs.) _____
Address _____	
City _____	State _____ Zip _____
Make Model #1 _____	Make/Model #2 _____
Insurance Company _____	Policy # _____
Amount of Liability Insurance _____ / _____	Policy Expiration Date _____
<small>Per Person</small>	<small>Per Occurrence</small>

Section II - Certification

I/We certify that for the 2017-2018 school year:

1. I/We will maintain insurance coverage for the vehicle(s) listed in Section I, and that my/our liability coverage provides at least **\$100,000 per person/\$300,000 per occurrence**.
2. The drivers' licenses listed above are current, and I/we will notify Pleasant Hill Christian School if these licenses are not renewed for any reason.
3. That I/we will not drive for any school sponsored trip until I/we have received notification of driver authorization from the Pleasant Hill Christian School office.
4. That all students riding in my/our vehicle(s) will be seated and secured with seatbelts in a non-airbag seat.
5. That I/we will advise Pleasant Hill Christian School of any change in information provided on this form, including, but not limited to, termination of license, change of insurance company, change in amounts of coverage, and/or change in vehicles.
6. That I/we will notify the Pleasant Hill Christian School main office if I/we no longer wish to drive, or wish to be removed from the Approved Driver list.

(Over for Sections III & IV)

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Section III - Signatures

The information provided on this form is true and correct to the best of my/our knowledge. I/We give the certification in Section II, and will take the utmost care in transporting Pleasant Hill Christian School students under my/our care.

Signature _____ Date _____

Spouse's Signature _____ Date _____

Section IV - School Information

I/We are available to drive for the following classes:

_____ TK/Kindergarten– Ms. Porter _____ 1st/2nd – Mrs. Reifsteck _____ 3rd/4th- Mrs. Harper
_____ 5th/6th – Ms. Kinser

This space for photocopies of Driver's License(s)

Attach a copy of your CURRENT declaration of insurance to this form.
(See attached example)

Please return this completed form to:

Pleasant Hill Christian School
1782 Pleasant Hill Road
Sebastopol, CA 95472