

## DRIVER INFORMATION FORM FOR PARENT/STUDENT DRIVERS

SCHOOL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

The following information is being collected for the purpose of determining your suitability, eligibility, and qualifications as a volunteer driver. This information will be protected and used in compliance with the Freedom of Information and Protection of Privacy (FOIP) Act.

Driver's License No. \_\_\_\_\_ Class \_\_\_\_\_

Expiry Date \_\_\_\_\_ Type of Vehicle Used \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_

Has your driver's license been suspended, or have you been convicted of any offence under the Highway Traffic Act during the last three years?

Yes \_\_\_ No \_\_\_ If yes, specify \_\_\_\_\_

Insurance Policy Number \_\_\_\_\_ Expiry Date \_\_\_\_\_

Third Party Liability (bodily injury and property damage) limits \$ \_\_\_\_\_  
(Recommended minimum is \$1 million)

The above information is true.

\_\_\_\_\_  
Signature of Volunteer Driver

\_\_\_\_\_  
Parent's Signature (if volunteer driver is a student)

Date \_\_\_\_\_