APPLICATION FOR AUTOMOBILE DRIVER AUTHORIZATION (For Current School Year Only)

	SCHOOL NAME:YEAR:	SCHOOL	
3.	DRIVER'S NAME:		
	DRIVER'S ADDRESS:	TELEPHONE:	
	DRIVER'S LICENSE NUMBER:	CLASS: EXPIRY	
	DATE:	<u></u>	
	Has your driver's license been suspended in the No □ If yes, please provide date of reinstatement:	(See Note #1 below)	
	Have you been involved in any accidents as a driver during the last three years?		
	Yes □	No □	
	If yes, please give details:		
	please provide particulars:		
7.	VEHICLE:	-	
7.	VEHICLE:	Second Vehicle (if any)	
7.	VEHICLE://	Second Vehicle (if any) / / / / Cape Make Model Cape Cape Cape Cape Cape Cape Cape Cape	
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	VEHICLE: // Make Model Capacity Plate #: Plate Expiry: iry: Vehicle Owner's Name: Vehicle Owner's Address:		pacity

D. COMMITMENTS:

I agree to abide by the requirements of the Highway Traffic Act and the applicable Traffic Bylaws while acting as a volunteer driver for school functions. I undertake to report to the school principal all incidents and any suspension of my license or change in my insurance status which may occur after the date of this authorization while it remains in force (i.e.: current school year).

I agree to operate the automobile referred to herein in a safe manner, to drive in accordance with the Highway Traffic Act, to limit the number of passengers to the number of seat belts which are usable and to comply with the directions of teachers or agents of the Board of Education.

	I accept the foregoing undertakings and certify that the information contained in this application is accurate to the best of my knowledge:	
	Driver: Vehicle Owner:	
	Parent/Guardian (if driver is under 18 years of age):	
NO	OTES:	
1.	Applications can be approved only when the driver possesses a valid driver's license and is able to respond no to questions concerning convictions and suspensions.	
FOR OFFICE USE ONLY: The above named driver is authorized to drive for the school during the current school year. The help is		
appreciated.		
Sig	nature of Principal (or Vice Principal): Date:	