

Approval for use of Private Vehicle: Employee

This authorizes		to voluntarily use their automobile
for the transportation of pupils of this scl	hool for	
on		
on Date of Activity	A	uthorized Official
Notice: By signing below I certify th	hat:	
I have completed the district's Type I	II defensive driver's prog	gram.
I certify that I have incurred no more the speed limit, within the last three y driving with a suspended license; (b) reckless driving; or (e) negligent driving	years. Also, I certify that hit and run driving; (c)	driving while under the influence; (d)
of \$100,000/\$300,000 bodily injury li single limit insurance for my personal understand that any insurance carried	iability and \$100,000 prolability and \$100,000 prolability will be I by the Everett Public See, and that Everett Public I is not responsible for re	e Schools carries no comprehensive or epair of any damages done to my
My vehicle is in safe operating condit passenger. I drive in a safe manner an regarding child passenger restraints.		
Registered Owner:		
Address:		
City:	State:	Zip:
Vehicle License No.:		State:
Driver License No.:		Expires:
Insurance Company:		Agent:
Signature		Date

Updated: March 2018 Revised: August 2018 Revised: August 2022