

## Authorization for Use of Private Vehicles

Authorization is hereby granted to use the following described vehicle to transport students to and from the school activity listed below:

Name of School: \_\_\_\_\_  
 School Activity: \_\_\_\_\_  
 Destination: \_\_\_\_\_  
 Date of Activity: \_\_\_\_\_ Time of Activity: \_\_\_\_\_  
 Driver's Name: \_\_\_\_\_  
 Driver's License#: \_\_\_\_\_ Expiry Date: \_\_\_\_\_  
 Year & Make of Vehicle: \_\_\_\_\_ License#: \_\_\_\_\_

*Note: Liability coverage is a minimum of \$1,000,000 (one million dollars).*

Name of Passengers	Medical (Please not any special medical concerns/requirements)	Phone Number (Required in case of Emergency)

**Note: Board Policy and Motor Vehicle Act require:**

- Copy of Vehicle Registration
- Copy of Vehicle Insurance
- Driver's Abstract
- Driver's Criminal Record Check
- Visual Inspection of the Vehicle

**The CUPE Collective Agreement requires:**

- 72 Hour Notice for Variances

\_\_\_\_\_  
Principal Signature

\_\_\_\_\_  
Date

Report all trips using Private or Commercial Vehicles Monthly.