

Albany Unified School District  
**DRIVER FORM AND DECLARATION**

<b>Driver's Last Name</b>	<b>Driver's First Name</b>
<b>Student's Last Name</b>	<b>Student's First Name</b>

**Address** \_\_\_\_\_

**Phone: (Home)** \_\_\_\_\_ **(Work)** \_\_\_\_\_ **(Cell)** \_\_\_\_\_

**Driver's License Information:**  
**Issued by (State):** \_\_\_\_\_ **Number** \_\_\_\_\_ **Expires** \_\_\_\_\_

**DMV Driving Record Report Date** \_\_\_\_\_

<b>Vehicle Information:</b>	<i>Vehicle 1</i>	<i>Vehicle 2</i>	<i>Vehicle 3</i>
<b>Make</b>			
<b>Color</b>			
<b>Year</b>			
<b># of Seatbelts</b>			
<b>License Number</b>			
<b>Registration Expiration Date</b>			
<b>Insurance Carrier</b>			
<b>Insured Drivers</b>			
<b>Insurance Expiration Date</b>			

I hereby offer to provide for the transportation of students of the Albany Unified School District. In making this offer, I understand in the event of a vehicular accident, coverage is provided by the volunteer driver's own automobile insurance. The school system does not provide insurance coverage should a vehicular accident occur while a volunteer driver is transporting students. I agree to the guidelines in the Volunteer Driver Packet. I certify that I am 21 years or older.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**