



Application for Appointment by Principal to Provide Transportation for Students

At _____ School Date: _____

Applicant's Information	
Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Surname:	First Name:
Miss <input type="checkbox"/> Ms. <input type="checkbox"/>	
Address:	
Telephone: Home	-or- Work
State your position (Teacher, Volunteer, or Other):	

Name of Your Automobile Insurance Company: _____

Company Agent or Address: _____

Insurance policy #: _____

Amount of liability coverage shown on the above policy:
\$ _____

Expiry date of insurance policy (or renewal date): _____ Ontario driver's license #: _____

Description of Vehicle You Plan To Use:		
<input type="checkbox"/> Owned	Make:	Model:
<input type="checkbox"/> Not Owned		

If the vehicle is not owned by you the following information is required:

Owner's Name: Surname	First name
Address:	
Telephone: (home)	(work)
I hereby give permission for the use of my vehicle to transport students:	
Signature of Owner	

Statement of Applicant

I understand the Thames Valley District School Board Policy, Terms and Conditions, and my personal responsibility with regard to minimum liability insurance coverage on the vehicle described above which will be the vehicle I will drive when transporting students. I will serve as Driver to transport students (I have a valid license and insurance policy) and report to the Principal should there be any change in the above information provided. I am 18 years of age and will endeavour to ensure that student passengers in my care will conduct themselves in a safe, responsible manner. I will report promptly any misconduct, accident, or injury to the Principal's office.

Signature of Applicant _____  Our Students, Our Future _____ Principal's Approval _____