

**Chebeague Island School Department  
School Committee Policy**

**IJOA-E2**

**Non-School Personnel Transporting Students in a Private Vehicle Form**

Driver's Name: \_\_\_\_\_ Date of Trip: \_\_\_\_\_

Vehicle Make and Model: \_\_\_\_\_

Reason for Driving: \_\_\_\_\_

\_\_\_\_\_

Auto Insurance Policy Information: \_\_\_\_\_

\_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

My signature below denotes that I am freely volunteering to drive Chebeague Island School students for a school activity. I also acknowledge that I am responsible for the students in my care, and my personal auto insurance is the primary insurance in case of an accident.

\_\_\_\_\_  
Driver's Signature

\_\_\_\_\_  
Date

Approved: June 6, 2017