## PARENT/GUARDIAN TRANSPORTATION AUTHORIZATION FORM (FIELD TRIP FORM)

International/Domestic Overnight Student Travel or Day Trip
These Forms Are Also Used For Student Activities

The purpose of this form is to give authorization to and provide vehicle information for transporting students by private vehicle during international or domestic overnight travel or a day trip on the dates listed below.

Students may be approved to transport other students on domestic overnight travel and day trips only. The district does not insure privately owned vehicles. Once completed, KEEP all of these forms and take them with you on your approved Field Trip. After trip, keep them on file for the duration of the school year.

## Student Travel/Transportation Authorization (Form A) This section to be completed by Parent/Guardian and Principal

I am aware that my child,	will be transported by the school during an
approved trip to:	
during the following date(s):	·
The driver(s) meets the specifications listed below and h license. Driver's license and insurance information is cor	nave been approved by the principal to have a valid driver's infidential and will be kept on file with the principal.
Jefferson County School District No. R-1 and its director claim or cause of action, rights, damages and demands	the activity listed above, I hereby release and discharge the s, employees, representatives, and Board of Education for an of any kind or nature, known or unknown, including claims for ed activity in which I and my child have elected to voluntaril
Signature of Parent/Guardian	Date
Principal's Signature	Date
<ul> <li>4. The driver is at least 17 years of age or older.</li> <li>5. The number of passengers carried shall not exceed t</li> <li>6. Under 18 years of age and driving less than 6 month</li> <li>7. Under 18 years of age and driving less than one year under the age of 21 (Does not apply to driver's immediately immediately apply to driver the second second</li></ul>	nimum standards of the Colorado Financial Responsibility Law he capacity of the vehicle and the state mandated laws. In there will be no one under the age of 21 as a passenger. In and more than 6 months, there will be only one passenger.
The following driver(s) have been authorized to transpor	rt students by private vehicle on the date(s) listed above:
Sponsor's Signature	Date

Date

Principal's Signature

The following information is confidential and is to be kept by the principal and is not for distribution in the Student Travel Packet. <u>Once completed, KEEP all of these forms and take them with you on your approved Field Trip.</u>

This section to be completed by <u>Parent and/or Staff Driver(s)</u> for International or Domestic Overnight Travel or Day Trip (Form C)

The insurance company providing coverage for my vehicle is	:
Insurance Company Name Policy #:	
I verify that the conditions outlined above will be complied w	with on this student travel experience.
Driver's License Number	Name of Driver (please print)
Signature of Driver	_
This section to be completed by <u>Student Description</u> Driver(s) for any Domestic Overni	
The insurance company providing coverage for my vehicle is	:
Insurance Company Name Policy #:	
I verify that the conditions outlined above will be complied w	with on this student travel experience.
Driver's License Number	Name of Driver (please print)
Signature of Student Driver	
Parent/Guardian Signature	
Date License Issued	If Issued Less Than One Year, # of Months
Student's Date of Birth	
Jefferson County School District R-1 Jefferson County, Colorado	