

**Cross Church/Shiloh Christian School
Church/School Driver Application Form
Confidential**

The purpose of this form is to protect those participating in church/school activities by being selective in the designation of persons authorized to drive church/school owned vehicles for church/school sponsored trips. Please fill out this form and return it, along with a front and back copy of your driver's license. A new Application Form must be filled out every three years. All references to *church* in this application mean Cross Church, Inc., Springdale, Arkansas. All references to *school* in this application mean Shiloh Christian Schools, Inc., Springdale, Arkansas. **By signing and submitting this application, you grant the church/school permission and authorization to verify any information provided in this application and to conduct any driver and/or criminal record check deemed appropriate by the church/school.**

Section 1: Personal Information

Name _____ Driver's License # _____
 Last _____ First _____ Middle _____ Expiration Date (DL) _____
 Date of birth _____ Social Security # _____
 Address _____ Phone: (home) _____ (cell) _____
 City _____ State _____ Zip _____ Number Years Driving Experience _____
 CDL (Bus) Driver _____ Non-CDL (Shuttle/Impact)Transport Driver _____ Work Truck Driver _____

Section 2: Driving Record Information: Please answer the following. If answering yes, please attach a sheet to this form describing the nature of the ticket(s), infraction(s), or accident(s) with cause.

Yes ___ No ___ Have you been in an accident within the last three (3) years? Number of accidents _____
 Yes ___ No ___ Have you been ticketed for moving violations within the last three (3) years? Number of tickets _____
 Yes ___ No ___ Have you been convicted or has your license been revoked or suspended?
 If yes, please list violation(s) _____ Date: _____

Section 3: Drivers Requirements and Declarations: Please check all accurate statements.

I certify that for the calendar year _____ for which I have volunteered to be a driver that:

- I possess a valid driver's license from the state of Arkansas or the state of _____. **Please attach copy of your Driver's License.**
- I am in good physical and mental health, it is safe for me to drive and neither my driver's license nor my ability to operate a vehicle is limited by any medical, physical, or emotional restriction or condition.
- I am at least 21 and not over 70 years old, and have a good driving record with at least five (5) years of extensive driving experience.
- I understand that, if approved as a Church/School or Volunteer Driver, I have a continuing obligation to advise the church/school of any change in information provided on this form including, but not limited to, involvement in a car accident in which I am cited, any citations for moving violations, non-renewal of license, or termination of license. I will promptly provide this information.
- I will comply with Arkansas laws, and the laws of other states in which I travel on a church/school trip, with regards to use and security of child restraint seats, lap/shoulder belt seating positions, restrictions on use of booster seats or other safety systems (including, but not limited to occupancy and seat facing designations for seats exposed to air bags).
- I will comply with the **Cross Church/Shiloh Christian School Transportation Policy**, a copy of which will be provided to me, if my application to be a Church/School Driver or Volunteer Driver is accepted.
- I affirm that I will carefully transport all persons under my care, including obeying all traffic laws and the church transportation policy.

In signing this form I certify that the information given by me on this form is true and correct to the best of my knowledge, and grant Cross Church, Inc./Shiloh Christian Schools, Inc. permission to obtain a copy of my motor vehicle driving record and to conduct any driver or criminal record check deemed appropriate by the church/school. I release Cross Church, Inc. /Shiloh Christian Schools, Inc. and/or its board, its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims, or lawsuits in regard to the information obtained from any and all of the above referenced sources used.

Driver's Signature _____ Date _____

(For church/School use only)

_____ Approved for _____ addition or _____ renewal to Cross Church, Inc./Shiloh Christian School Church/School Driver List
 _____ Declined Reason _____

Transportation Manager Signature _____ Date _____
 Administrator's Signature _____ Date _____