

Transportation Permission Form

PLEASE PRINT

Student's Name (As listed on Birth Certificate): _____ Date of Birth: ___ / ___ / ___
Last Name, First Name, Middle Name

Permission to Transport Student to or from School-related Events

This section must be completed in order to authorize a volunteer driver to transport a student to or from school-related events.*

**A volunteer driver is reviewed and approved as a qualified driver by the school.*

I authorize any school-approved volunteer driver to transport my child by motor vehicle to/from school-related events.
Parent/Guardian Name (please print): _____
Parent/Guardian Signature: _____ Date: ___ / ___ / ___

Permission for Student Self-Transport to or from School-related Events

This section must be completed in order to authorize a student to transport him/herself to or from school-related events.

I authorize my child to transport him/herself by motor vehicle to/from school related events.
Parent/Guardian Name (please print): _____
Parent/Guardian Signature: _____ Date: ___ / ___ / ___