

### District Regulations/Exhibits – Jefferson County School District R-1

Book: District Regulations/Exhibits – Jefferson County School District R-1  
 Section: J: Students  
 Title: Parent/Guardian Transportation Authorization Form  
 Number: JJH-E3  
 Status: Active  
 Legal:  
 Adopted: 04/01/2003  
 Last Revised: 01/29/2007  
 Last Reviewed:

#### Policy Detail

#### PARENT/GUARDIAN TRANSPORTATION AUTHORIZATION 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.

#### Student Travel/Transportation Authorization To be completed by Parent/Guardian and Principal

I am aware that my child, \_\_\_\_\_ will be transported by private vehicle during an approved trip to: \_\_\_\_\_ during the following date(s): \_\_\_\_\_

The driver(s) meets the specifications listed below and have been approved by the principal to have a valid driver's license. Driver's license and insurance information is confidential and will be kept on file with the principal.

In consideration of my child's voluntary participation in the activity listed above, I hereby release and discharge the Jefferson County School District No. R-1 and its directors, employees, representatives, and Board of Education for any claim or cause of action, rights, damages and demands of any kind or nature, known or unknown, including claims for attorney's fees and costs arising out of the aforementioned activity in which I and my child have elected to voluntarily participate.

\_\_\_\_\_  
 Signature of Parent/Guardian Date

\_\_\_\_\_  
 Principal's Signature Date

#### Driver Specifications for Parents/Staff/ Student Driver(s)

1. The vehicle being driven will be in good operating condition.
2. All students must wear seat belts.
3. The vehicle has liability insurance that meets the minimum standards of the Colorado Financial Responsibility Law.
4. The driver is at least 17 years of age or older.
5. The number of passengers carried shall not exceed the capacity of the vehicle and the state mandated laws.
6. Under 18 years of age and driving less than 6 months there will be no one under the age of 21 as a passenger.
7. Under 18 years of age and driving less than one year and more than 6 months, there will be only one passenger under the age of 21 (Does not apply to driver's immediate family).
8. You can not drive a vehicle carrying more than one passenger under 21 unless you have held your drivers license for at least one year.

The following driver(s) have been authorized to transport students by private vehicle on the date(s) listed above:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Sponsor's Signature Date

\_\_\_\_\_  
 Principal's Signature Date

The following information is confidential and is to be kept by the principal and is not for distribution in the Student Travel Packet.

To Be Completed By Parent/Staff Driver(s) International or Domestic Overnight Travel or Day Trip

The insurance company providing coverage for my vehicle is: \_\_\_\_\_

Insurance Company Name Policy # \_\_\_\_\_

I verify that the conditions outlined above will be complied with on this student travel experience.

\_\_\_\_\_  
Driver's License Number Name of Driver (please print)

\_\_\_\_\_  
Signature of Driver

To Be Completed By Student Driver and Parent/Guardian of Student Driver(s) Domestic Overnight Travel or Day Trip

The insurance company providing coverage for my vehicle is: \_\_\_\_\_

Insurance Company Name Policy # \_\_\_\_\_

I verify that the conditions outlined above will be complied 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