Corcoran Unified School District STUDENT PERMISSION TO DRIVE PERSONAL VEHICLE FOR OFF CAMPUS CLASSES

	I, will be attending	
Comr Schoo	I, will be attending munity College for class(es) pertaining to my studies at ol.	High
1.	I am a licensed driver in the State of California and my license number is, the expiration date is (MM/DD/YY)	
2.	I drive a,(Year) (Make & Model)	
3.	My vehicle is equipped with seat belts, and I agree to abide by all seat belt laws.	
4.	There will be no financial charge by me to the school district for the use of this vehicle	
5.	I agree to the fact that no one , including other students , will be transported in this vehicle when I am traveling for these classes.	
6.	I carry insurance with Insurance Company. The effective dates of policy:, policy number Insurance agent: Also, I understand that my insurance will primary coverage when I am involved in travel to and from College.	rance r: _ Agent's I I be the
to driv	, as parent of agreed for my child to participate in these classes and have also agreed to a ve themselves to and from Co ose.	allow my child ollege for this
	(Parent's Signature)	
	THE UNDERSIGNED, UNDERSTANDS THE ABOVE DRIVER REQUIRED AND AGREES TO COMPLY WITH THESE REQUIREMENTS IN ALL INST	
Date:	(Driver's Signature)	
	(Parents Signature)	