

LORD SELKIRK SCHOOL DIVISION EMPLOYEE DRIVER FORM

For the transportation of Students on Approved Out-of-School Educational Events

Date:

To:	Lord Selkirk School Division
Name	(please print)
Addre	ss:(please print)
Schoo	e to meet the following conditions if I am transporting students on any Out-of- I Education related activities or events approved by the school and/or Lord Selkirk I Division during the current school year:
1.	That I will be in possession of a valid driver's license for the class of vehicle I will use:
2.	That I will use a licensed automobile which carries valid automobile Third Party Liability Insurance as required under Manitoba legislation;
3.	That the vehicle, which I will use, will be mechanically fit and that there are seat belts in working condition for all passengers;
4.	That I will comply with Manitoba's seat belt laws;
5.	That I will update, in a timely manner, changes to the information provided below.
Driver	s License No (attach photocopy)
Vehicl	e Registration No (attach photocopy)
Signat	ure:
	etion of the form with accurate information ensures the above named driver is ed under the Lord Selkirk School Division's general liability insurance.
Recei	ved by:
Date:	<u> </u>