

VOLUNTEER DRIVER OPERATOR'S STATEMENT

I, _____, swear (or affirm) under penalty of law, that I have not in the last two years been convicted of any of the below stated crimes:

1. Reckless driving
2. Operating a motor vehicle while under the influence of an intoxicant or controlled substance
3. Any crime
 - a) Homicide or great bodily harm resulting from the operation of a motor vehicle and which is criminal.
 - b) Upon the 2nd or any subsequent conviction for operation of a motor vehicle while under the influence of an intoxicant or controlled substance, in accordance with the order of the court.
 - c) Any felony in the commission of which a motor vehicle is used.
 - d) Failure to stop and render aid as required under the laws of this state in the event of a motor vehicle accident resulting in death of or personal injury to another or in serious property damage.
 - e) Perjury or the making of a false affidavit or the making of a false statement or certification to the department under this chapter or any other law relating to the ownership or operation of motor vehicles.
 - f) Operating a motor vehicle while operating privileges are suspended or revoked.
 - g) Operating a motor vehicle without having furnished proof of financial responsibility when proof of financial responsibility is required.
 - h) Violation of a restriction on his license or a serious traffic violation by the holder of an occupational license.

I further swear (or affirm) that:

4. I presently hold a valid driver's license.
5. I presently am carrying automobile liability insurance which is not less than \$50,000 for property damage, \$100,000 for bodily injury, and a total limit of not less than \$300,000. PLEASE PROVIDE A COPY OF YOUR INSURANCE STATEMENT THAT SHOWS THE LIABILITY LIMITS FOR WHICH YOU ARE COVERED.

NO ONE IS AUTHORIZED TO DRIVE ON A FIELD TRIP IF THE OFFICE DOES NOT HAVE THIS FORM.

IT IS RECOMMENDED THAT CHILDREN UNDER THE AGE OF 12 NOT SIT IN THE FRONT SEAT OF A VEHICLE WHERE AIR BAGS ARE PRESENT.

Signature of Operator _____
Driver's License Number _____ State _____
Expiration Date _____ Today's date _____