Clear Form

MIAMI-DADE COUNTY PUBLIC SCHOOLS

REQUEST FOR APPROVAL TO USE PRIVATE VEHICLE FOR TRANSPORTING STUDENTS

_____
SCHOOL

Teacher/Sponsor _____ Today's Date _____

Activity/Event _____ Date(s) of Event _____

APPROVAL IS REQUESTED TO USE THE FOLLOWING VEHICLE AND DRIVER FOR THE PURPOSE STATED:

Name of Vehicle Owner _____

Address of Owner _____

Make/Model/Year of Vehicle _____/_____/_____ License Plate No. _____

If this vehicle is other than an Automobile is it on the approved list? yes ☐ no ☐

Automobile Insurance Company _____ Insurance Exp. Date _____ Policy # _____
mm/dd/yy

Coverage: Automobile Liability $ _____ Property Damage $ _____
(Minimum $10,000/$20,000) (Minimum $10,000)

Name of the Driver if Different from Owner _____

Valid Driver's License No. _____ Expiration Date _____

PROPOSED USE: For transportation of approximately _____ students from _____
(Point of Departure)

to _____ to _____
(Destination) (Point of Departure)

(VEHICLE MUST HAVE AN OPERABLE PAIR OF SEAT BELTS FOR EACH STUDENT-MAXIMUM OF 8)

APPROVED:

_____ _____
Principal (Date)

FM-6298 Rev. (05-20)