

\_\_\_\_\_

SCHOOL NAME

Single Use

Student Vehicle Authorization

Parent Approval

Student's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Please check the proper boxes.

Yes            No  
\_\_\_\_            \_\_\_\_ Student has a valid Florida Drivers License

\_\_\_\_            \_\_\_\_ Student has auto liability insurance in accordance  
with Florida Law

Florida Statute 324.021 requires PROOF OF FINANCIAL  
RESPONSIBILITY - That proof of ability to respond in  
damages for liability on account of accidents  
arising out of the use of a motor vehicle:

- a. In the amount of \$10,000 because of bodily injury  
to, or death of, one person in any one accident.
- b. Subject to such limits for one person, in the  
amount of \$20,000 because of bodily injury to, or  
of, two or more persons in any one accident.
- c. In the amount of \$10,000 because of injury to, or  
destruction of, property of others in any one  
accident.

I hereby attest the statements made above are true and I authorize my  
student to utilize the type of transportation identified below for  
this field trip.

Drive own car\_\_\_\_ Drive family car\_\_\_\_  
Drive car & carry passengers including fellow students\_\_\_\_\_

Field trip destination: \_\_\_\_\_

Departure date/time: \_\_\_\_\_

Return date/time: \_\_\_\_\_

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

\_\_\_\_\_  
Signature of Parent

\*NOTE: Maximum capacity is one (1) person per seat belt.  
No motorcycles/scooters/mopeds/vans permitted as  
transportation.