

## UUCD Driver Qualifications for Transporting Minors

Volunteer drivers are welcome and necessary for some UUCD functions and activities. To protect the safety of our children, it is church policy that any individual driving in any official capacity for UUCD, and transporting minors as passengers (other than his or her family members), shall meet the following qualifications:

1. Possess an adult driver's license valid in Connecticut
2. Demonstrate Evidence of Financial Responsibility for the vehicle being operated, as required by Connecticut law
3. Be at least twenty-one years of age

It shall be the responsibility of the UUCD staff member or volunteer in charge of a church function or activity to ensure that these qualifications are met by obtaining from each prospective driver a completed Driver Qualification Form. This form shall be completed by the prospective driver and shall include the following information:

1. The full name and address of the prospective driver, as shown on his or her driver's license
2. The driver's license number and expiration date
3. The insurance company, policy number, and expiration date covering the vehicle or vehicles that will be driven
4. The year, make, and model and the license plate number of the vehicle(s)
5. The signature of the driver, confirming that the information provided is true and that the driver is at least twenty-one years of age

Completed Driver Qualification Forms shall be filed promptly with the church office and will remain valid through the end of the program year during which the form was completed.

For the purposes of this policy, "functions and activities under UUCD auspices" will include both scheduled and spontaneous activities, whether programmatic, operational, or social, that are sponsored, led, or directed by committees, staff members, or designated volunteers of UUCD.

### Unitarian Universalist Congregation of Danbury, CT - Driver Qualification Form

Please fill in the following information:

Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Driver's license number and expiration date: \_\_\_\_\_

Insurance company: \_\_\_\_\_

Insurance policy number: \_\_\_\_\_

Insurance expiration date: \_\_\_\_\_

Year, make, and model of automobile: \_\_\_\_\_

License number of automobile: \_\_\_\_\_

By signing this form I agree that the information provided on it is true, and that I am at least twenty-one years of age.

Signature: \_\_\_\_\_

In addition, please staple to this sheet a page that includes copies of your:

- Driver's license & Proof of automobile insurance