Holy Cross Lutheran School - Wichita, Kansas
Pupil Transportation by Private Vehicle
Driver's Statement for the 2026-2027
School Year

The voluntary use of private passenger vehicles to provide transportation for students to and from school-sponsored and approved activities and field trips is often the only way transportation can be arranged for the activity. So that the parents' full attention may be given to the education and safety of the students, siblings of students will not be able to attend school field trips.

In this event, certain requirements must be met for the safety and protection of both the driver and the students riding as passengers in the private passenger vehicle.

The following must be guaranteed to be true statements:

- I (we) will be the driver, and I am at least 21 years of age.
- I (we) have a valid +driver's license. **(Please submit a copy to the office)**
- I (we) have an excellent driving record, having no more than one moving violation for the past two years.
- I (we) will obey all traffic rules and regulations, including speed limits.
- The vehicle is road worthy and safe.
- The vehicle is insured with the following limits of liability.
  Bodily Injury: $300,000.00 Single Limit, or, $100,000/$300,000 and/or
  Property Damage: $100,000 single limit.
  PIP protection limit of $10,000
- The insurance policy names the driver as an insured. **(Please submit a copy.)**
- I (we) will not have a student ride in the front passenger's seat (grades K-5) if the car is equipped with a passenger side air bag.
- I (we) will require all passengers to be secured by a seat belt while providing transportation for school events, including a booster seat/or car seat as required by law. Children ages 4 to 8 years of age, who weigh less than 80 pounds or are under 4 feet 9 inches tall, must ride in a booster seat.
- I (we) will use cell phones and other electronic devices only for emergencies or trip-related communication.
- I (we) will not smoke or use any form of tobacco in the vehicle or anytime in the presence of a child.
- I (we) understand that the teacher will arrange for the refreshments for all students, as necessary.
- I (we) will only stop at designated places outlined by the teacher.

I (we) affirm that all of the above statements are true. Date:_____

(Mother): _____ (Father):_____

ALSO, PLEASE PRINT YOUR NAME BELOW AS WELL AS SIGNING ABOVE:

(Mother): _____ (Father):_____

Holy Cross Lutheran Church & School

Sharing God's Love Through Faith in

RELEASE AND AUTHORIZATION

In connection with my application for employment or volunteer service, I understand that you may be requesting information concerning my motor vehicle operation history, credit history and criminal history from various state, nation and public sources, including Central Registries for Child Abuse and other public records available.

I HEREBY AUTHORIZE, WITHOUT RESERVATION, ANY LAW ENFORCEMENT AGENCY, STATE OR FEDERAL AGENCY, ADMINISTRATOR, INSTITUTION, INFORMATION SERVICE BUREAU OR EMPLOYER TO FURNISH ANY AGENT OF HOLY CROSS LUTHERAN CHURCH AND SCHOOL THE ABOVE INFORMATION.

I further acknowledge that a telephonic facsimile (FAX) or photographic copy shall be as valid as the original. My signature acknowledges that I have been given the opportunity to make a copy of this release for my records.

Date _____ Signature _____

The following must be filled out completely for your application to be considered. Please *print legibly*.

Do not leave any space blank.

Last Name _____ First Name _____ Middle Initial _____

Maiden Name _____ *(list N/A if not applicable)*

Married names, nicknames or other names used: *(list "None" if none apply)*

_____

Date of Birth: _____ Race: _____

Driver's License Number: _____ State Issued: _____

Social Security # _____ Gender: _____

Current Address:

_____

Street City, State Zip Code

600 N. GREENWICH ROAD
WICHITA, KANSAS
67206 - 2633

(316) 684-5201 (CHURCH)
(316) 684-4431 (SCHOOL)
(316) 684-2847 (FAX)

Return completed form to:

(Business Manager, Holy Cross Lutheran Church and School)