

Woodridge Local School District

PARENTAL CONSENT FOR TRANSPORTATION BY PRIVATE VEHICLE

I have reviewed the following information and consent to my child being transported by private vehicle for this purpose.

Purpose of the Trip(s) _____

Date(s) of the Trip(s) _____

Time of Departure _____ Time of Return to School _____

Owner of the Vehicle _____

Driver of the Vehicle _____

Description of the Vehicle (make, model, and year) _____

I understand the school verifies that the driver has a valid operator's license and possesses/maintains vehicle liability insurance in the amount required by District administrative guidelines. In addition, I understand the Board requires the driver to affirm and certify that their vehicle is in proper operating condition, and that a safety belt will be available for each child in the vehicle. I agree to instruct my child to use the safety belt. Further, I understand the Student Code of Conduct applies while my child is being transported in the private vehicle.

Parent Signature

Date

10/1/13