



**Diocese of Erie  
Volunteer Driver Information Sheet**

Date \_\_\_\_\_

**Personal Information**

Name \_\_\_\_\_  
(First) (Middle) (Last)

Address \_\_\_\_\_ How Long? \_\_\_\_\_ (# of years)  
(Street)

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Driver's License Information**

\_\_\_\_\_  
(State) (License Number) (Class) (Expiration Date) (Birth Date)

**Auto Insurance Information**

Insurance Company \_\_\_\_\_

Policy Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Liability Limits of Policy (\$100,000 minimum) \_\_\_\_\_  
*Attach a copy of insurance card to back of this form.*

**Accident Record**

*(Please list all accidents for the past three years—use back of sheet if more space is needed.)*

Date                      Type (Head-on, Rear-end, Roll-over)                      Injuries                      Fatalities

Last Accident \_\_\_\_\_

Next Previous \_\_\_\_\_

**Have you ever been charged with driving under the influence (DUI)? If yes, please give full details. (Use back of sheet if more space is needed.)**

\_\_\_\_\_  
\_\_\_\_\_

**Certification**

**I certify that the information given on this form is true and correct to the best of my knowledge. I understand that, as a volunteer driver, I must be 21 years of age or older and hold a valid driver's license.**

Signature \_\_\_\_\_ Date \_\_\_\_\_