

EAST Adelaide Secondary Vocational Schools Alliance

Travel in Private Vehicles Form – 2023 / 24

Students who drive themselves, take student passengers or are a passenger with another student, must have signed consent. All drivers and passengers must complete Section A, all drivers must complete Section B, all drivers under the age of 18 must complete Section C and all passengers under the age of 18 must complete Section D.

SECTION A: All drivers and passengers

Student Name: _____ Home School: _____
Year Level: _____ Home/Care Group: _____ Date of Birth: ____ / ____ / ____
VET Course Name: _____ Host School: _____

SECTION B: All drivers

The following statements are true in relation to my vehicle:

- I hold a current driver's licence
- The car I will be driving is registered
- The car I will be driving is covered by one of the following insurances (please tick):
 - Third party property
 - Comprehensive
- Seat belts in the car will be used by all passengers
- I am aware that there is no provision by the school nor the Department for Education for any claims which may result from use of this vehicle

DRIVER

Name: _____ Signature: _____ Date: _____

REGISTERED OWNER

Name: _____ Signature: _____ Date: _____

SECTION C: All drivers under the age of 18 (to be completed by parent/caregiver)

I give my permission for the student identified in Section A to drive for the purpose of travel to and/or from a VET course and confirm that the details above (in Sections A and B) are correct in relation to my child and the vehicle to be used.

PARENT / CAREGIVER

Name: _____ Signature: _____ Date: _____

SECTION D: All passengers under the age of 18 (to be completed by parent/caregiver)

I give my permission for the student identified in Section A to be a passenger with the student driver for the purpose of travel to and/or from a VET course. I am aware that there is no provision by the school nor the Department for Education for any claims that may result from this arrangement.

DRIVER

Name: _____ Signature: _____ Date: _____

PARENT / CAREGIVER

Name: _____ Signature: _____ Date: _____