

Ferndale Area School District
Application for Use of School Van

Name of Applicant Organization _____

Name of Applicant _____ Date of Application _____

Destination _____ Date of Use _____

_____ Completed Disclosure and Release Form Employee Driving Record Information with Dave Gates.

_____ Have NOT completed Disclosure and Release Form Employee Driving Record Information.

Purpose for which the school van will be used (Include the number of students attending.)

_____ Approved

_____ Denied

Building Principal Signature

Date

_____ Approved

_____ Denied

Superintendent Signature

Date

Date of Pre-Approval Notification _____

Date of Board Approval _____

Remarks

