## **DRIVING HISTORY QUESTIONNAIRE**TO BE FILLED OUT EVERY YEAR

## **RETURN COMPLETED FORM TO:** Blackhawk School District, District Office

(Please Type or Print)				
Applicant Name	D	ate of Birth	Phone	
Building		Department		
Driver's License #	Exp. Date	State, Country	or Interna	tional
1. Have you held a driver's licer	nse for the last 3 year	s?	Yes	No
2. During that time, have you driven at least 2,000 miles?			Yes	No
3. During that time, have you d	riven these vehicles?			
		Auto	Yes	No
		Minivan	Yes	No
		Van	Yes	No
		Bus	Yes	No
		<15' Truck	Yes	No
		Large Truck	Yes	No
4. During that time, what other	motor vehicles have	you driven (4 or more wh	eels)?	
Vehicle Type(s)	# of Mi	les Driven		
5. Have you been convicted of any moving violations in the last 3 years?			Yes	No
6. Was there an accident involved in your traffic violation(s)?			Yes	No
7. Have you been in a vehicle accident while driving during the last 3 years?			Yes	No
If you answered <b>YES</b> to question	ns 5, 6, or 7, please d	escribe below:		
<u>Date</u> <u>City/State</u> <u>Desc</u>			ription_	
I certify that all the information	•			
understand, and agree to abide immediately notify the District	•		-	_
suspended during the year. Vic	olation of Blackhwk S	_	-	
privileges and/or other discipli	nary action.			
Signature				