

# Berrian Insurance Group

E-mail: contact@big-ins.com Fax: (303)795-5833

## Scholastic + Program

### Supplemental Application- Driving Schools

Please complete this application and submit with the Acord application for any driving school being submitted .

#### General

Number of students enrolled: \_\_\_\_\_

Estimated Average Daily Attendance: \_\_\_\_\_

#### Automobile

• *Please attach mvr's for all drivers*

1. Is there a maintenance program for vehicles?  Yes  No
2. Are mvr's ordered prior to hiring?  Yes  No. Are they checked annually?  Yes  No
3. Are pre-employment drug tests given?  Yes  No
4. Describe vehicle garaging facilities: \_\_\_\_\_  
\_\_\_\_\_
5. Is personal use of covered vehicles strictly prohibited?  Yes  No. If no, please explain: \_\_\_\_\_  
\_\_\_\_\_
6. Is the owner or any instructor permitted to take a vehicle home?  Yes  No
7. Are records kept on all drivers with accidents or violations?  Yes  No. Is follow-up action taken as required?  Yes  No.
8. Are formal written procedures in place for dealing with driver accidents or violations?  Yes  No
9. Do all vehicles have dual controls?  Yes  No
10. Are all vehicles clearly marked as driver training vehicles?  Yes  No

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Please provide driver experience as follows:

Name: \_\_\_\_\_ Years experience as a driving instructor: \_\_\_\_\_

Name: \_\_\_\_\_ Years experience as a driving instructor: \_\_\_\_\_

Name: \_\_\_\_\_ Years experience as a driving instructor: \_\_\_\_\_

Name: \_\_\_\_\_ Years experience as a driving instructor: \_\_\_\_\_

Name: \_\_\_\_\_ Years experience as a driving instructor: \_\_\_\_\_