



Student Driving Policy

This policy was approved and ratified by Cox Green School
Leadership Team on 19/11/24

Version	Authorisation	Approval Date	Effective Date	Next Review
1	Full Governing Body	15/10/13	15/10/13	June 2014
1.1	Full Governing Body	20/10/14	20/10/14	June 2016
1.2	Senior Leadership Team	June 2016	June 2016	June 2019
1.3	Senior Leadership Team	Oct 2018	Oct 2018	Oct 2021
1.4	Senior Leadership Team	Sept 2021	Sept 2021	Sept 24
1.5	Senior Leadership Team	19/11/24	19/11/24	Nov 24



Cox Green School Student Parking Log

Student name: _____

Tutor Group: _____

Vehicle Make: _____

Colour: _____

Registration Number: _____

Please be aware that you are unable to drive on behalf of Cox Green School, e.g. be employed to drive/asked to drive by Cox Green staff member.

<input type="checkbox"/>	I confirm that I have shown my driving licence to a member of staff. (PLEASE TICK)
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- I confirm that I am properly insured to drive a vehicle under the specific circumstances listed below
- and
- I confirm that I have disclosed all the above driving activities to my insurers and the insurers have confirmed I have the proper insurance to cover all of the above.

(please tick each box as appropriate)

<input type="checkbox"/>	I am insured to drive myself to and from school;
<input type="checkbox"/>	I am insured to transport passengers (such as friends and family) to and from school;
<input type="checkbox"/>	I am insured to drive and take passengers during school study time to and from others schools in the consortium to undertake lessons
<input type="checkbox"/>	I am insured to drive my vehicle from school or home to a sports fixture/activity in and out of school time;
<input type="checkbox"/>	I am insured to drive to work experience placements or any other similar event that are privately arranged.

Student signature: _____ Date: _____

Parent signature: _____ Date: _____

Complete this form and hand to the Sixth Form Mentor for school records

Official use only:

Licence checked Y/N Declaration complete Y/N Staff Name _____ Date _____