Date form Completed:	
Date form Combleted:	

Adult and Child Center/ Foster Family Licensing TRANSPORTATION AGREEMENT

Name of Foster Parent 1:	DOB:	
Driver's License #:		
Name of Foster Parent 2:	DOB:	
Driver's License #:		
functions of the foster parent(s) is transportation of the	d's stay with a foster family, one of the many important foster child to and from appointments and activities. While asion as their work schedule allows, foster parents should not retation.	
	(other than the parents) to help/assist with transportation persons who reside in or outside of the family home, and may or low if this option is marked.	
Transporter #1:	Driver's License #	
Insurance agency:	Policy #	
Transporter #2:	Driver's License #	
Insurance agency:	Policy #	
Transporter #3:	Driver's License #	
Insurance agency:	Policy #	
(Use back of page for additional individuals. Please include all above information). Background checks may be required of these individuals, depending on the frequency and level of contact/supervision provided by the transporter.		
services, when I am not able to provide it myself, is my responsible for providing transportation for foster child available. Furthermore, I agree to follow safe driving p transporting children in any vehicle.		
By signing below, $I(We)$ attest that $I(we)$ currently have and will continuously maintain automobile insurance, without lapse, on any and all of our vehicles that foster children are transported in.		
Foster Parent 1	X Foster Parent 2	