

340 Fair Street  
Evansville, WI 53536  
Phone: (608) 882-5224  
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# Evansville

Community School District

**VERIFICATION OF  
FITNESS TO DRIVE**

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

STAFF MEMBER \_\_\_\_\_ NON-STAFF MEMBER \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

Persons driving school-owned vehicles or private vehicles to transport Students must submit at least once every three years to the Human Resources a medical opinion stating that he/she is not afflicted with or suffering from any mental or physical disability or disease such as to prevent reasonable control of a motor vehicle.

**ATTEST:**

This is to certify that I find the above-named individual is not afflicted with or suffering from any mental or physical disability or disease such as to prevent reasonable control of a school-owned vehicle or a private vehicle transporting students.

PHYSICIAN: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Signature)

NAME: \_\_\_\_\_  
(Please print name)

*NOTE: This verification must be renewed **every three (3) years** and filed with Human Resource Office of Evansville Community School District.*