



# YOUNG DRIVER QUESTIONNAIRE

INSURED'S NAME

POLICY NUMBER

**THIS SECTION IS TO BE COMPLETED BY THE YOUNG DRIVER IN HIS/HER OWN HANDWRITING**

NAME OF YOUNG DRIVER

DATE OF BIRTH (MM/DD/YY)

DRIVER'S LICENSE NUMBER

DO YOU RESIDE WITH YOUR PARENTS? IF NO, WHERE?

YES  NO

DO YOU ATTEND SCHOOL?

NAME AND ADDRESS OF SCHOOL

HIGHEST GRADE COMPLETED

YES  NO

HIGH SCHOOL GRADE AVERAGE

COLLEGE GRADE AVERAGE

LIST ANY SCHOOL/COMMUNITY ACTIVITIES

LIST ANY HONORS FOR SCHOLASTIC OR OTHER ACHIEVEMENTS

HAVE YOU EVER BEEN EXPELLED, SUSPENDED, OR PLACED ON PROBATION BY ANY SCHOOL? IF YES, EXPLAIN.

YES  NO

HOW MANY DAYS A WEEK DO YOU DRIVE TO SCHOOL?

DISTANCE TO SCHOOL (ONE WAY)

NAME AND ADDRESS OF EMPLOYER, IF ANY

DESCRIBE OCCUPATIONAL DUTIES

HOW MANY DAYS A WEEK DO YOU DRIVE TO WORK?

DISTANCE TO WORK (ONE WAY)

WHICH CAR DO YOU DRIVE TO SCHOOL/WORK? (YEAR/MODEL)

DO YOU OWN OR HAVE YOU CONTRIBUTED TO THE PURCHASE OF ANY AUTO IN THE HOUSEHOLD? IF YES, EXPLAIN.

HOW LONG HAVE YOU BEEN DRIVING AUTOMOBILES?

YES  NO

HAVE YOU TAKEN AN ACCREDITED DRIVER TRAINING COURSE? IF YES, ATTACH CERTIFICATE.

DESCRIBE YOUR USE OF ALCOHOLIC BEVERAGES & DRUGS

YES  NO

**IF ANY "YES" RESPONSES, PLEASE PROVIDE A COMPLETE EXPLANATION.**

1. DO YOU HAVE ANY DRIVING LIMITATIONS IMPOSED BY YOUR PARENTS?

YES  NO

2. DO YOU ALLOW OTHERS TO USE YOUR CAR? (WHO AND WHY)

YES  NO

3. HAS YOUR DRIVER'S LICENSE OR PERMIT EVER BEEN REVOKED OR SUSPENDED?

YES  NO

4. HAVE YOU EVER RECEIVED A TICKET, CITATION, OR WARNING FOR ANY TRAFFIC VIOLATION OTHER THAN PARKING? (GIVE DATES AND DETAILS)

YES  NO

5. HAVE YOU EVER BEEN IN AN ACCIDENT AS A DRIVER? (GIVE DATES AND DETAILS)

YES  NO

6. HAVE YOU EVER BEEN ARRESTED OR DETAINED FOR ANY REASON, OTHER THAN A TRAFFIC VIOLATION? (GIVE DATES AND DETAILS)

YES  NO

7. IS THE AUTO YOU OPERATE MODIFIED OR EQUIPPED WITH ANY SPECIAL EQUIPMENT, HAVE MODIFIED BODYWORK, OR SPECIAL PAINT?

YES  NO

8. HAVE YOU EVER HAD AUTO INSURANCE DECLINED OR CANCELED? (GIVE DATES AND DETAILS) (NOT APPLICABLE IN MISSOURI)

YES  NO

APPLICANT'S STATEMENT: I HAVE READ THE ABOVE APPLICATION AND I DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF ALL OF THE FOREGOING STATEMENTS ARE TRUE. (Kansas: This does not constitute a warranty.)

YOUNG DRIVER'S SIGNATURE

DATE (MM/DD/YY)

PRODUCER'S SIGNATURE

AGENT'S COMMENTS

Globe Insurance Agency, Inc. and  
Globe Insurance Agency of Kentucky, Inc.