



## Nursing & Allied Health Department

### Reliable Transportation Agreement: Auto Insurance

I, \_\_\_\_\_, do not have Auto Insurance due to not owning a vehicle, but I do have reliable transportation to take me to my clinical site for my required minimum 100 clinical hours for my Certified Nursing Assistant license.

I, \_\_\_\_\_, understand that for any reason I am unable to attend my required clinical site hours that I will fail NURSING 260, Nursing Assistant course.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_