

# CHIMACUM SCHOOL DISTRICT

## AUTHORIZATION TO TRANSPORT STUDENTS FORM

2320F-3/6625F

Any adult transporting student's for district business in their personal vehicle must complete this form. Employees are not to drive their personal vehicle for district business without prior approval by means of written notification from the district. It is your responsibility to notify the District Office of any changes that occur during the school year that could affect district approval (i.e. license cancellation or suspension, cancellation of automobile insurance, serious motor vehicle violation or at-fault accident).

### TRIP INFORMATION

TODAY'S DATE:	BUILDING OR LOCATION:
DATE OF TRIP:	MAXIMUM NUMBER OF STUDENTS TRANSPORTING:
DESTINATION OF TRIP:	
PURPOSE OF TRIP:	

### DRIVER SCREENING/INSURANCE REQUIREMENTS

LEGAL NAME OF DRIVER:	
<input type="checkbox"/> VOLUNTEER <input type="checkbox"/> EMPLOYEE <input type="checkbox"/> OTHER _____	
VEHICLE YEAR/MAKE/MODEL:	VEHICLE LICENSE #:

<b>YES/NO</b>	I am older than 25 years of age with a minimum of 5 years driving experience.
<b>YES/NO</b>	I have a valid Washington State driver's license. Driver's License #: _____ Exp. Date: _____
<b>YES/NO</b>	I have had no vehicle moving violations or at-fault accidents within the last three years. If you have had any, please list:
<b>YES/NO</b>	I carry minimum auto liability limits of \$100,000 per occurrence and \$300,000 aggregate combined single limit of liability (or \$100,000/\$300,000 Bodily Injury; \$50,000 Property Damage), automobile medical payments <u>or</u> Personal Injury Protection Coverage and uninsured motorist coverage.  Insurance Company: _____ Policy #: _____
<b>YES/NO</b>	I am aware that, in the event of an accident while on district business or school-related activity, any claims will be tendered to my personal automobile insurance company and my insurance is primary

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**VEHICLE INSPECTION – COMPLETED BY DRIVER**

<b>YES/NO</b>	There is a working seat belt for the driver and each passenger, and I enforce the wearing of seat belts by all.
<b>YES/NO</b>	My vehicle's brakes, including the emergency brake, are in good working order.
<b>YES/NO</b>	My vehicle's tires have legal tread depth (at least 3/32").
<b>YES/NO</b>	My vehicle's brake lights, turn indicators, and headlights are in good working order.
<b>YES/NO</b>	My vehicle's windows are clear and provide an unobstructed view for the driver.
<b>YES/NO</b>	My vehicle has functioning rear view mirrors (center and left side).
<b>YES/NO</b>	My vehicle has no other physical defects that would interfere with the safety of the driver and passengers.
<b>YES/NO</b>	My vehicle has a rated capacity of ten passengers or less.
<b>YES/NO</b>	If my vehicle has dual airbags, I will not seat children under 12 or small persons in front passenger seat.
<b>YES/NO</b>	I will not transport students in a motor home, fifth-wheel trailer, cargo compartment of a van or truck bed.
<b>YES/NO</b>	I agree to use booster seats/car seats when required by Washington State law.
<b>YES/NO</b>	I agree all occupants of my vehicle will have and use their own individual seatbelt.

The above information is true and accurate to the best of my knowledge. I agree to notify the district of any motor vehicle infractions (tickets) and/or chargeable accidents or cancellations or reduction of coverage to my automobile insurance

\_\_\_\_\_  
Signature of Driver

\_\_\_\_\_  
Date

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**ADMINISTRATIVE REVIEW**

<b>YES/NO</b>	If the employee is required by job description to regularly drive their personally owned vehicle for district business, the district has required driver to provide an original motor vehicle abstract (three-year comprehensive record) from the Department of Licensing. This abstract has been reviewed and meets district approval.
<b>YES/NO</b>	All "NO" responses have been addressed satisfactorily

**I have reviewed the above information and this applicant and/or vehicle are approved for transporting students on district business or field trips.**

\_\_\_\_\_  
Signature of Administrator/Designee (District Office)

\_\_\_\_\_  
Date

**NOTE:** Only employees of the Chimacum School District will be authorized to drive a Chimacum School District van or vehicle.