



### DECLARATION OF DRIVER

Driver Name: \_\_\_\_\_

School or Center: \_\_\_\_\_

Teacher: \_\_\_\_\_ School Year: \_\_\_\_\_

**The driver and registered owner who sign(s) this form assure(s) the Oakland Unified School District as follows:**

1. That the driver is at least 21 years of age and holds a current valid California driver's license.
2. That the driver has not been convicted of reckless driving or driving under the influence of drugs or alcohol within the past five years.
3. That the vehicle described below is insured by \_\_\_\_\_ Insurance Company with policy limits of at least \$100,000 per individual and \$300,000 per occurrence for liability for bodily injury; and \$50,000 per occurrence for liability for property damage.

Policy No.: \_\_\_\_\_; Policy expiration date: \_\_\_\_\_.

4. That Oakland Unified School District may confirm the above by telephone or written communication to the insurance agent listed below:

\_\_\_\_\_  
Name of Insurance Agent

\_\_\_\_\_  
Telephone Number of Insurance Agent

\_\_\_\_\_  
Address of Insurance Agent

5. That the driver and registered owner understand that Oakland Unified School District is not responsible for accidents or injuries that may occur and provides no insurance coverage whatsoever for the vehicle, driver, passengers or others.
6. That the driver will ensure that all passengers use safety belts or appropriate child car seat at all times.
7. That the vehicle meets all safety requirements and that the driver has received a copy and will follow the "Driver Instructions" on page 2 of this form.

\_\_\_\_\_  
Year                      Make                      Model                      Passenger Capacity                      Vehicle License No.

I certify that the information provided on this form is true and correct.

\_\_\_\_\_  
Date                      Driver Name                      Signature of Driver                      Driver's License No.                      Cell Phone No.

I certify that the information provided on this form is true and correct and that driver has consent to use above vehicle to drive Oakland Unified School District students on above field trip or excursion.

\_\_\_\_\_  
Date                      Registered Owner Name                      Signature of Registered Owner (if different from driver)

**Attach a photocopy of driver's license and current insurance card or declarations page**



## **DRIVER INSTRUCTIONS FIELD TRIPS OR EXCURSIONS**

Please follow the below instructions when transporting OUSD students on field trips or excursions:

1. Check the safety of the vehicle which will be used including: tires, brakes, lights, horns, suspension, etc.
2. Carry only the number of passengers for which your vehicle was designed. If you have a pickup truck, carry only as many as can safely sit in the passenger compartment.
3. Require each passenger to use an appropriate passenger restraint system (child car seat or safety belt) in accordance with law.
4. Obey all traffic laws.
5. Make sure the supervising teacher has advised you of any relevant medical conditions or allergies for those students assigned to your vehicle.
6. Make sure you have exchanged an emergency contact number with the supervising teacher in case you get lost, separated or there is an emergency. In case of emergency, keep all the children together and call 911, the supervising teacher and the school. If you cannot reach school personnel, contact the School District Superintendent's office at 879-8200.
7. You may not transport **anyone** during a field trip or excursion who has not been approved in advance by the supervising teacher and/or site principal.