



Volunteer Agreement and Background Check Permission

At Bethany Christian Schools (BCS), the safety of our students and employees is a top priority. By signing this document, the individual named herein grants BCS permission to perform a criminal background check. By signing this I also certify that I have not been accused or convicted of, or pleaded guilty or no contest to any abuse or sexual misconduct.

Prospective Volunteer Name: _____

Previous Name(s): (ie: maiden name) _____

Date of Birth: _____ **Phone:** _____

Address: _____

I authorize BCS to perform a background check on my criminal record.

Printed Name

Signature

Date

Please complete the backside of this form to be eligible to drive a BCS vehicle or transport students in your personal vehicle.

Driver Information

Driver Name - As shown on license: _____

Date of Birth: _____ Is this a commercial driver license? Yes No

Driver's license state and DL number: _____

Attach a copy of both sides of current valid driver's license along with a copy of personal auto insurance.

Driver Screening

In the past three years:

- | | | |
|--|------------------------------|-----------------------------|
| 1. Have you been at fault for any accidents? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Have you had any moving traffic violations? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Have you had any insurance company cancel or refuse to provide you with auto insurance? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Have you had your driver's license revoked, suspended or restricted? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Have you had any physical impairments other than corrective glasses? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Have you ever been charged with or convicted of "driving while Intoxicated" or "driving under the influence"? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If any question(s) 1-6 have been answered with "yes", please provide details below. (dates, descriptions, amounts, or other explanation)

Details: _____

Driver Agreement

1. I have attached a copy of both sides of my current valid driver's license. I understand that drivers must be 25+ years old. I also understand that drivers 75+ years old must have a physical form completed by a doctor.
2. I authorize BCS to perform a background check on my criminal and/or driving record. I certify that I have nothing in my medical history, criminal background, and/or driving record that would prevent me from being able to safely drive a school owned vehicle and/or transport students. I agree to recuse myself from providing further transportation for BCS, if I later experience a status change in any of these areas after signing this agreement.
3. I will make the best efforts to drive with due care, provide for the safety of all occupants, and obey all traffic laws. I will ensure that passengers in the vehicle wear seatbelts. If I have any questions or concerns, I will promptly contact an appropriate BCS staff member.
4. I will drive only vehicles that I own and insure myself, or vehicles owned by Bethany, with school approval of either arrangement. I have attached a copy of my current valid auto insurance for my vehicle. I understand that if I am driving my personal vehicle, my own auto insurance will be primary.

Printed Name

Signature

Date