

Volunteer Driver Checklist

TRIP INFORMATION

Date: _____ School: _____

Purpose of Trip: _____

Date of Trip: _____

Trip is to: _____ From: _____

Students to be transported by this driver: (A completed parent/guardian permission (Policy 2320 form 1) is required for each student listed below.)

_____	_____
_____	_____
_____	_____
_____	_____

DRIVER SCREENING / INSURANCE REQUIREMENTS

Name of Driver: _____

Vehicle Year / Make / Model: _____ License #: _____

Please respond to each item with a yes or no answer:

Yes/No

_____ I carry minimum auto liability of \$100,000 per occurrence and \$300,000 aggregate and uninsured motorist coverage (attach a copy of proof of insurance.)
Company: _____ Policy #: _____

_____ I will make sure every student is wearing their own seat belt.

_____ I will not transport children 12 and under or small adults in the front seat of a vehicle equipped with a passenger-side air bag.

_____ **I am aware that, in the event of an accident while on a school-related activity, any claims will be tendered to my personal automobile insurance company.**

UNACCEPTABLE DRIVING RECORD

- If a driver has any of the following violations or convictions, he/she would not be able to transport students (i.e., having any of the following violations or citations on the driving abstract would be an **unacceptable driving record for at least five (5) years**). This list is not comprehensive, there may be other offenses that would be unacceptable for any volunteer driver.
 - More than one moving violation in the past 12 months
 - More than two moving violations in the last 3 years
 - Driving while intoxicated
 - Reckless driving
 - Driving while under the influence of drugs
 - Speed contest (racing)
 - Hit and run
 - Driving while license is suspended or revoked
 - Driving without valid driver's license
 - Vehicular assault, homicide, or manslaughter
 - Any citations for failure to maintain auto insurance
 - Any at-fault accidents

I AGREE TO HAVE THE SCHOOL SEND THIS PAPER WORK TO OTHER SCHOOL'S WHERE I HAVE STUDENTS ENROLLED:

Parent signature

Date

Please List Schools

I have attached photocopies of the following documents to this form:

- () Drivers License**
- () Registration**
- () Vehicle Insurance**
- () Driver's Abstract**

The above information is true and accurate to the best of my knowledge.

Signature of Volunteer Driver

Date

Recommend Approval / Disapproval (Teacher/Advisor/Coach) Please Circle One

Signature of Teacher/Advisor/Coach

Date

ADMINISTRATIVE REVIEW

_____ The volunteer has provided a copy of the Volunteer's driver's abstract from the department of licensing.

_____ The volunteer has passed screening by the District's Human Resources Department in the last year.

_____ All students have parental permission to ride with the volunteer driver.

_____ All "NO" responses have been addressed satisfactorily.

I have reviewed the above information and this driver and vehicle are approved for this trip.

Signature of building Administrator/Designee

Date