

VOLUNTEER PERSONAL AUTOMOBILE USE FORM

[One Form Required for Each Driver to be Approved]

Thank you for volunteering your time and your automobile to help transport our students to off-site events or activities. In order to protect the health and safety of our students, our District requires that anyone (employee or volunteer) using their personal automobile to transport students to and from sanctioned activities must receive prior approval. Before we can issue such approval, certain information must be obtained at least 6 weeks before you transport our students. You must also agree to abide by certain rules regarding the operation of the vehicle as set forth below.

REOUIRED INFORMATION

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Name of Driver:	
Calif. Driver's License No. & Exp. Date:	
Vehicle(s) Year/Make/Model:	
Vehicle(s) License Plate No.:	
Insurance Carrier:	
Insurance Policy # and Expiration Date:	
Liability Coverage Limits:	(Minimum Required: \$50,000/100,000 liability and \$25,000 property damage)
your driver's license or insurance policy exprequired before you will again be eligible to a (a) obtain a copy of your driver record hist check, and (c) contact your insurance corpursuant to Insurance Code Section 11580.9 coverage for any accident resulting in I coverage will apply, if at all, only after you The District does not cover, nor is the District for your vehicle. VEHICLE SAFETY AND TRANSPORTA	river's license, and (b) your Insurance Policy Declarations Page. Should ire during the school year, updated photocopies showing their renewal are ransport students. By signing below, you are also authorizing the District to ory and status of your driver's license, (b) conduct a criminal background apany to confirm your insurance status. Also, please be advised that (d), in the case of an accident, your insurance will provide the primary odily injury or property damage. The District's automobile liability insurance coverage is exhausted through the payment of covered claims. It responsible for, comprehensive, uninsured motorists, or collision coverage TION PROCEDURES AND REQUIREMENTS
lack of sleep, or distraction of any kind	impaired, whether due to alcohol, drugs (prescription or nonprescription), I will at all times comply with California law regarding proper operation of all speed limits and posted signs and placards.
unsafe due to weather or other natural	e I have reason to believe may be mechanically unsafe or that may become onditions. I will not transport students unless I have a working seatbelt for t all times by myself and all transported students. The vehicle(s) may be
3. I am over the age of 21 and will be the sole driver of the vehicle for any given activity, event or competition. I will not let anyone other than myself and authorized students ride in the vehicle. However, I may seek written permission from the District to allow another child of mine to ride in the vehicle to a specific activity, event, or competition <u>if</u> the destination involves an activity, event or competition generally available to the public or, at my expense and with District permission, I can purchase admittance for such other child.	
Printed Name Sig	nature Date
Date Received by District:	Received by: