



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 such approval may be granted, certain information must be submitted at least fifteen (15) days before you transport our Students. You must also agree to abide by certain rules regarding the operation of the vehicle as set forth below.

REQUIRED INFORMATION

Name of Driver (please print legibly): Last First		Ca. Driver's License #:	Expiration Date:
Vehicle(s): Make: Model Yr.		Vehicle(s) License Plate:	Name of Registered Owner
Insurance Information: Carrier Name:	Policy Number:	Expiration Date	Insurance Liability Coverage Limits:

We also require a photocopy of (a) your Driver's license, (b) your Insurance Policy Declarations Page and (c) Driver Record/History (K4 -3yr) printout. Should your Driver's License or Insurance Policy expire during the school year, updated photocopies showing their renewal are required before you will again be eligible to transport Students. By signing below, you are also authorizing the District to (a) obtain a copy of your Driver Record History and status of your Driver's License, (b) conduct a criminal background check, and (c) contact your insurance company to confirm your insurance status. Also, **please be advised**, that pursuant to Insurance Code Section 11580.9(d), in the case of an accident, **your insurance will provide the primary coverage for any accident resulting in bodily injury or property damage.** The District's automobile liability coverage will apply, if at all, only after your insurance coverage is exhausted through the payment of covered claims. The District does not cover, nor is the District responsible for, comprehensive, uninsured motorists, or collision coverage for your vehicle. The minimum State acceptable liability limit for privately owned vehicles is \$15,000-35,000 per occurrence. My policy meets and/or exceeds this minimum: *(please attach a copy of insurance policy)* Yes No

VEHICLE SAFETY AND TRANSPORTATION PROCEDURES AND REQUIREMENTS

For the safety of our Students, in signing below, you are also agreeing to the following rules and requirements:

1. I will not operate an automobile while impaired, whether due to alcohol, drugs (prescription or nonprescription), lack of sleep, or distraction of any kind. I will at all times comply with California law regarding proper operation of the Vehicle, including compliance with all speed limits and posted signs and placards.
2. I will not transport Students in a Vehicle I have reason to believe may be mechanically unsafe or that may become unsafe due to weather or other natural conditions. I will not transport Students unless I have a working seatbelt for each Student, with seatbelts to be used at all times by myself and all transported Students. The Vehicle(s) may be inspected by District representatives.
3. I am over the age at least 18 years of age 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 **if 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.**

_____	_____	_____	
<i>Volunteer Name</i>	<i>Signature of Volunteer</i>	<i>Date</i>	
_____	_____	_____	_____
<i>Signature of Administrator</i>	<i>Date</i>	<i>Date District received</i>	<i>Initials Date</i>