

THIS FORM MUST BE TURNED IN AT LEAST 3 DAYS BEFORE THE TRIP

VOLUNTEER DRIVER APPLICATION FORM

2009/2010 School Year

West Valley Christian Academy 1790 Sequoia Blvd. Tracy, CA 95376 (209) 832-4072

We often need help in transporting students on field trips. Our school parents have been generous in their assistance. The purpose of this form is to reduce the liability of the school and volunteer drivers by being proactive in our selection of parent drivers. If you are interested in helping with such needs during the school year, please fill out this form and return it **(along with copies of your driver's license and your current vehicle insurance coverage page-not your proof of insurance card)** to the school. A new Volunteer Driver Application Form must be filled out each school year.

Section I - Volunteer Driver Information

Name: _____ Driver's License # : _____ Ex Date: _____

Phone:(H) _____ Work: _____ Cell/Pager: _____

Address: _____

Car Model/Yr. #1: _____ Car Model/Yr. #2: _____

Number of working seat belts in car #1: _____ Car #2: _____ License# car #1: _____

License# car #2: _____

IMPORTANT - PLEASE READ!

The **school requires volunteer drivers** to have a minimum amount of liability insurance. (1) \$100,000 liability per person for bodily injury; (2) \$300,000 liability per incident for bodily injury for all vehicle occupants; and (3) \$50,000-\$100,000 liability for property damage. All information on your insurance coverage page **must be current**.

Car #1 Insurance Co.: _____ Policy #: _____

Uninsured/underinsured motorist coverage?: Yes: _____ No: _____

Car #2 Insurance Co.: _____ Policy #: _____

PLEASE ANSWER ALL OF THE QUESTIONS BELOW

_____ Yes _____ No Are you licensed to drive a commercial vehicle?

_____ Yes _____ No Have you been in an accident in the last three years? If you answered YES, please describe the accident and its cause on another sheet of paper and attach to this form.

_____ Yes _____ No Have you been ticketed for moving violations within the last three years? If you answered YES, please describe the infractions on another sheet of paper and attach to this form.

_____ Yes _____ No Have you been convicted for DWI/DUI of alcohol or drugs, or had your license suspended for moving violations, hit and run, eluding an officer, reckless or negligent operation of a vehicle, or driving while under suspension or revocation? (Note: Our school will not be able to use volunteers with a "yes" answer even if the incident took place before the person became a Christian).

Section II - Requirements for Volunteer Drivers

I certify that for the 2009/2010 school year:

- I possess a valid California driver's license. Please attach a photocopy of your driver's license and first page of your car insurance policy(ies) that indicates your coverage.
- I will maintain the minimum insurance coverages required by the school for volunteer vehicles for the vehicle(s) listed in Section I and only volunteer to drive when such insurance policies and coverages are in force.
- I understand that in case of any type of accident, injury, or vehicle damage, the school's liability insurance policy does not provide primary or direct insurance on my vehicle. The school's insurance will take effect only after my personal auto insurance limits are exhausted. I will advise the school of any change in information provided on this form including, but not limited to, involvement in a car accident in which I am cited, any citations for moving violations, non-renewal of license, termination of license, change of insurance company, change in amounts of insurance coverage, termination of insurance, or change in vehicle.
- Students riding in my vehicle(s) will be seated and in both the front and back seat will be secured with individual working seatbelts. Students will not be seated in the front seat if they do not meet the minimum weight/age requirement. (No double belting of children is permitted.)
- Students riding in my vehicle who do not meet the 6 year/60 lb weight requirement will be in car seats.
- I will notify school personnel if I no longer wish to drive or if I wish to be removed from the Approved Driver List.

Section III - Declaration and Signature

I affirm that I will carefully transport students under my care, including obeying all traffic laws. The information given on this form is true and correct to the best of my knowledge.

**YOU MUST TURN IN A COPY OF YOUR DRIVER'S LICENSE AND INSURANCE DECLARATION PAGE
(not proof of insurance card) WITH THIS FORM**

Signature: _____

Date: _____

Section IV - School Administration Approval

_____ Approved _____ Disapproved for addition to the school's Approved Driver List.

Administrator's Signature: _____

Date: _____

If you will be a volunteer driver and arrive back from the field trip after dismissal time, you must check in with the office.