

VOLUNTEER DRIVER APPLICATION FORM

2019-20 School Year

Westside Christian Academy, 23096 Center Ridge Rd., Westlake, OH 44140 440-331-1300; Fax # 440-331-1301
We often need help in transporting students on field trips or for sports events. 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 proof of insurance)** to the school. A new Volunteer Driver Application Form must be filled out each school year.

Name: _____ Phone: _____

Car Model/Year #1: _____ Car Model/Year #2: _____

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

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

____ Yes ____ No Have you been in an accident in the last three years? If yes, explain on back of this form.

____ Yes ____ No Have you been ticketed for moving violations within the last three years? If yes, explain on back.

____ 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? If yes, please explain giving dates, etc. _____

Requirements for Volunteer Drivers

I certify that for the **2019-20** school year:

- I possess a valid _____ (state) drivers license. **Please attach a photocopy of your driver's license and proof of insurance.**
- I will contact my insurance agent to ascertain if there are any liability policy limits or exclusions regarding transporting other students or faculty members on a field trip that might affect my ability to meet the qualifications for a volunteer driver.
- I will maintain the minimum insurance coverage required by the school for volunteer vehicles for the vehicles listed in Section I and only volunteer to drive when such insurance policies and coverage 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, nonrenewal 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 in both the front and back seat (younger students will not be seated in front with air bags) and will be secured with individual working seatbelts. (No double belting of children is permitted).
- To my knowledge, my vehicle is in safe operating condition (brakes, tires, etc.).
- I will read and follow the Driver and Chaperone Instructions sheet for the field trip.
- I will notify school personnel if I no longer wish to drive or if I wish to be removed from the Approved Driver List.

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. **(Please attach a photocopy of your driver's license and proof of insurance).**

Signed: _____ Date: _____

SECTION IV – School Administration Approval

____ Approved ____ Not Approved – Reason _____

Administrator's Signature: _____ Date: _____