



Policy 807 Volunteer Automobile Driver Authorization Form

Depending on the facts of individual cases there may be insurance coverage available under Board of Education insurance policies. Volunteers are strongly encouraged to ensure that a package policy with coverage of at least \$2,000,000 be placed on any car being used by the Volunteer to drive for school purposes.

In order to provide clarity for the principal regarding who is acceptable as a volunteer driver, it is proposed that salient information be collected at the outset of a school year so that a bank of volunteer drivers' names could be maintained in the school office. That information is shown below.

A. SCHOOL NAME: _____ SCHOOL YEAR: _____

B. DRIVER INFORMATION

FAMILY NAME: _____

ADDRESS: _____

TELEPHONE: _____

DRIVER # 1 NAME: _____

DRIVER'S LICENSE NUMBER: _____ CLASS: _____ EXPIRY DATE: _____

i. Has your driver's license been suspended in the last three years? Yes No
*(*Please see note below.)*

ii. If yes, please provide date of reinstatement: _____

iii. Have you been involved in any accidents as a driver during the last three years? Yes No
If yes, please give details:

iv. Have you been convicted of an offense under the Highway Traffic Act, the Motor Vehicle Administration Act, or for any motor vehicle related offense under the Criminal Code during the last three years? Yes No

If yes, please provide particulars:

D. COMMITMENTS:

I agree to abide by the requirements of the Highway Traffic Act and the applicable Traffic Bylaws while acting as a volunteer driver for school functions. I undertake to report to the school principal all incidents and any suspension of my license or change in my insurance status which may occur after the date of this authorization while it remains in force (i.e. current school year).

I agree to operate the automobile referred to herein in a safe manner, to drive in accordance with the Highway Traffic Act, to limit the number of passengers to the number of seat belts which are usable.

I agree to comply with the directions of teachers or agents of the Board of Education with regard to travel arrangements for students.

I accept the foregoing undertakings and certify that the information contained in this application is accurate to the best of my knowledge:

Signature of Driver #1: _____ Date: _____

Signature of Driver #2: _____ Date: _____

Signature of Vehicle Owner: _____ Date: _____

Signature Parent/Guardian (if driver is under 18 years of age):
_____ Date: _____

** NOTE: Applications will be reviewed and may be rejected when drivers are unable to respond "no" to questions concerning infractions, convictions and suspension. Factors listed in Administrative Policy No. 807 – Procedures, Section c(i), will be considered, including the nature and severity of the incident and the frequency of incidents.*

FOR OFFICE USE ONLY:

The above named Driver #1 is authorized to drive for the school during the current school year.
The help is appreciated.

Signature of Principal (or Vice Principal): _____ Date: _____

The above named Driver #2 is authorized to drive for the school during the current school year.
The help is appreciated.

Signature of Principal (or Vice Principal): _____ Date: _____