Volunteer Driver Application Form

24/25 School Year

Sandpoint Christian School • 477954 Highway 95 • Ponderay, Idaho 83852 • (208) 265-8624

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 your current vehicle insurance card) to the school. A new Volunteer Driver Application Form must be filled out each school year.

All information given on this Volunteer Driver Application Form is confidential and will not be shared.

Section I – Volunteer Driver Information First Name: _____ Middle Name: _____ Last Name: _____ Driver's License #: _____ Exp. Date: _____ Issuing State: ____ Gender: M F Social Security Number: Date of Birth: Phone #: (Cell) Address: The school requires volunteer drivers to have a minimum amount of liability insurance. (1) \$25,000 liability per person for bodily injury/death; (2) \$50,000 liability per incident for bodily injury/death for all vehicle occupants; and (3) \$15,000 liability for property damage. Please list the amount of liability insurance below. Car #1 Model / Year _____ Number of working seat belts in car: _____ Insurance Co.: _____ Policy #: ____ License Plate #: Liability Insurance: (1) \$______ (2) \$______ (3) \$_____ Do you have uninsured / underinsured motorist coverage? Yes \(\begin{align*} \text{No} \\ \\ \end{align*}\) Model / Year Number of working seat belts in car: Insurance Co.: _____ Policy #: _____ License Plate #: _____ Liability Insurance: (1) \$______ (2) \$______ (3) \$_____ Do you have uninsured / underinsured motorist coverage? Yes \(\omega\) No \(\omega\) ☐ Yes ☐ No Are you licensed to drive a commercial vehicle? ☐ Yes ☐ No Have you recently taken CPR / First Aid training? ☐ Yes ☐ No Have you been in an accident in the past three years? If you answer YES, please describe the accident and its cause on another sheet of paper and attach it to this form. ☐ Yes ☐ No Have you been ticketed for moving violations within the last three years? If you answer YES, please describe the infractions on another sheet of paper and attach it 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? If you answer YES, please describe the

incident on another sheet of paper and attach it to this form.

$Section \ II-Requirements \ for \ Volunteer \ Drivers$

I certify that for the	school year:	
	valid (state) driver's license. surance policy(ies).	Please attach a photocopy of your driver's license and first page of
• I will conta	ct my insurance agent to ascertain if th	here are any liability policy limits of exclusions regarding transporting that might affect my ability to meet the qualifications for a volunteer
• I will maint		s required by the school for volunteer vehicles for the vehicle(s) listed the insurance policies and coverages are in force.
 I understand not provide auto insura 	d that in case of any type of accident, primary or direct insurance on my vence limits are exhausted. (Note: This	injury, or vehicle damage, the school's liability insurance policy does chicle. The school's insurance will take effect only after my personal is is the only coverage that most nonprofit organizations can provide even obtaining primary or direct coverage on the vehicles of volunteer
in a car acc change of in • Students ric working se	ident in which I am cited, any citations nsurance company, change in amounts ding in my vehicle(s) will be seated	tion provided on this form including, but not limited to, involvement is for moving violations, nonrenewal of license, termination of license, of insurance coverage, termination of insurance, or change in vehicle, and in both the front and back seat will be secured with individual en is permitted.) As required by Idaho state law, I will have a child
	wledge, my vehicle is in safe operatin	g condition (brakes, tires, etc.).
• I will read a	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.
Section III – P	ermission for Background (Check (ALL VOLUNTEERS MUST COMPLETE)
may include a reviet trips and some volu I hereby release and	ew of sex offender registries, child al inteer positions are conditional upon t	dpoint Christian School to conduct a background check on me, which buse and criminal history records. I understand that driving for field he school receiving no inappropriate information on my background. y Sandpoint Christian School, its officers, employees and volunteers vide such information.
Signature		Date
Printed Name		
Section IV – D	eclaration and Signature	
	carefully transport students under my discorrect to the best of my knowledge.	care, including obeying all traffic laws. The information given on
Signature		Date
Section V – Sc	hool Administration Appro	val
☐ Approved	☐ Disapproved for addition to t	he school's Approved Volunteer Driver List
Principal's Signature		Date