



FIELD TRIP DRIVER APPLICATION FORM

The purpose of this form is to reduce the liability of the school and our volunteer drivers by being proactive in our selection of drivers for student transportation. If you are interested in helping with such needs during the school year, please fill out this form and return it to the school office along with the following:

- This Driver Application Form
- Student Transportation Policy – Signed (see attached)
- Copy of valid CA driver’s license
- Current driving record (see directions below)

How to Access a Copy of your Driving Record:

1. Go to www.dmv.ca.gov
2. You must Log In or Register
3. Once you register, you will get an email verifying your information. It will direct you to a link for verification. Once you do this, you can log-in to the website.
4. Log In
5. Click on Online Services, scroll down to [Driver Record](#)
6. On the Driver Record Request page, scroll down to the bottom and click Continue
7. You will request an unofficial copy of your Driver’s record and pay \$2. (For an official copy, there is a form to send to the DMV. The unofficial copy is sufficient.)
8. Print it out and return it with the other required forms for field trip drivers.

FYI: The driver’s record includes the following information - Driver’s license no. and identifying information, License status, Convictions, Accidents

- Copy of current auto registration
- Copy of the Declaration page for your current vehicle insurance coverage
 - o Insurance minimums are:
 - Public Liability/Bodily Injury \$100,000/\$300,000 per occurrence
 - Property Damage \$50,000 per occurrence
 - Medical \$5,000 per occurrence
- Livescan (you only need to have one done once while you are at VCS)
- TB Test (Once every four years)

No parent will be approved to drive on field trips without all of the above documents on file.

Please note: Field trip drivers must be approved yearly.

APPLICATION-

SECTION I – Driver Information

Name: _____ Address: _____

Phone: (H) _____ (W) _____ (C) _____

CA Driver’s License #: _____ Exp Date: _____

Vehicle #1

Color/Make/Model/Year: _____

License plate #: _____ Number of working seat belts (back seat only): _____

Insurance Company: _____ Policy #: _____

Uninsured/Underinsured motorist coverage? Yes _____ No _____

Vehicle #2

Color/Make/Model/Year: _____

License plate #: _____ Number of working seat belts (back seat only): _____

Insurance Company: _____ Policy #: _____

Uninsured/Underinsured motorist coverage? Yes _____ No _____

SECTION II – Driver History

PLEASE ANSWER ALL OF THE QUESTIONS BELOW:

Do you have any of the infractions below on your driving record?

- Two (2) or more moving violations _____ YES _____ NO
- One (1) at-fault and one (1) moving violation _____ YES _____ NO
- Three (3) or more seat belt violations _____ YES _____ NO

Do you have three (3) or more moving violations and/or accidents whether or not at-fault (i.e. includes 2 moving violations and 1 at-fault accident or combination thereof)? _____ YES _____ NO

Have you been convicted for DWI/DUI of alcohol or drugs? _____ YES _____ NO

Have you ever 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? _____ YES _____ NO

SECTION III – Driver History

I certify that:

1. I possess a valid California driver’s license.

2. 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 driver.
3. I will maintain the minimum insurance coverage required by the charter school for the vehicle(s) listed in Section I and only volunteer to drive when such insurance policies and coverage are in force.
4. I understand that in case of any type of accident, injury, or vehicle damage, Valley Charter School's liability insurance policy DOES NOT provide primary or direct insurance on my vehicle. Valley Charter School's insurance will take effect only after my personal auto insurance limits are exhausted. I will advise Valley Charter 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.
5. The number of individuals riding in my vehicle(s) will not exceed the number of passengers the vehicle is designed to carry or the number of working seat belts.
6. Students will be in their own seats and secured with individual working seat belts. (No double belting of children is permitted.)
7. No child under the age of 12 will ride in the front passenger seat.
8. Students will not be left unattended in the vehicle.
9. I will maintain my vehicle(s) in safe operating conditions (brakes, tires, etc.).
10. I will operate my vehicle(s) in a safe manner, including NOT using a cell phone while driving.
11. I will read and follow the instructions for driving and chaperoning students provided by the sponsoring teacher of the field trip. I agree to help direct children to cooperate with directions and instructions given by the teacher in charge of the activity. I will make alternative arrangements for my VCS student's siblings' care as I am aware that they cannot participate in VCS field trip activities.
12. I will notify the school personnel if I no longer wish to drive or wish to be removed from the Approved Driver List.
13. I will comply with school volunteer requirements including but not limited to fingerprinting, Livescan, and TB tests.

SECTION IV – 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 and belief.

You must submit copies of your current driver's license, current driving record (MVR), auto registration, and insurance declaration page with this form.

Signature

Date

SECTION V – School Administration Approval

_____ Approved for placement on Valley Charter Elementary School's Approval Driver List

_____ Denied placement on Valley Charter Elementary School's Approval Driver List

Signature of Principal/Designee

Date