

VOLUNTEER DRIVER APPLICATION

School name: _____

(To be completed by employees and volunteers transporting students)

Driver's Name:			
Driver's Address:			
Phone Numbers:	Home:		Cell:
Driver is a:	Parent [<input type="checkbox"/>]	Child's Name: _____	
	Staff [<input type="checkbox"/>]	Other: _____	
Vehicle Owner is the:	Driver [<input type="checkbox"/>]	Other: _____	
Vehicle Owner Address is:	As Above [<input type="checkbox"/>]	Other: _____	
Vehicle Make/Model/Year:			
Max. Number of Passengers:	_____ (excluding the driver)		
Elementary school drivers:	My vehicle has (____) seats that meet the criteria for safe placement of booster seats.		
*Driver's Abstract copy	Please attach a recent copy of your driver's abstract. (Driver's must request a copy of their own abstract. This can be done through the ICBC website or by visiting any ICBC driver licensing office at no charge)		
*PLEASE ENSURE THE INFORMATION IN THE SECTION BELOW IS VERIFIED BY A SCHOOL STAFF MEMBER			
BC Driver's License #:			
BC Vehicle License Plate:			
Insurance Documents:	Please show staff your insurance documents for verification of insurance coverage and license plate.		
	Office Use Only:		
	<input checked="" type="checkbox"/> BC Driver's License # confirmed _____ (Staff initial) <input checked="" type="checkbox"/> Verification of license plate confirmed _____ (Staff initial) <input checked="" type="checkbox"/> Verification of insurance coverage confirmed _____ (Staff initial) <input checked="" type="checkbox"/> Minimum of \$1,000,000 Third-Party Liability Insurance confirmed _____ (Staff initial)		

DRIVER'S STATEMENT:

I hereby acknowledge and agree to:

- Keep the safety of students as the highest priority and follow instructions by the Educator-in-Charge of the field trip;
- Ensure that the vehicle I use for student transportation is insured, rated appropriately, insured and that a minimum Third-Party Liability insurance of \$1,000,000 is maintained;
- Provide a safe, roadworthy vehicle licensed in British Columbia and operate the vehicle in a safe manner and as required by law;
- Notify the Principal if any events occur that negatively impact my suitability to transport students as a volunteer;
- Provide a non-smoking environment while transporting students;

- Not, at any time during my performance as a volunteer driver, use any alcoholic beverages or any restricted substances or any substances that may affect my ability to safely operate a motor vehicle;
- Comply with distracted driving legislation while transporting students and refrain from using a cellular device while transporting students;
- Follow all applicable school district policies and procedures, including all Health & Safety policies and procedures;
- Notify the Principal of any motor vehicle accidents that occur while transporting students; and
- Ensure that adequate passenger restraint systems (i.e. seat belts, booster seats) are used in the vehicle used to transport students and will ensure that all children under 12 years of age do not ride in the front seat

The information you are submitting is collected under the authority of the School Act and the British Columbia Freedom of Information and Protection of Privacy Act (FIPPA). This information is to be used by School District No. 42 (Maple Ridge – Pitt Meadows) for the purpose of safely transporting students where specific volunteer drivers, are organized, directed and supervised by the school district. If you have any questions or concerns about the collection, use or disclosure of the personal information collected on this form please email privacy@sd42.ca.

Please review and confirm consent below with your initials:

I acknowledge that I have read, understand and agree to the above and give my consent to the collection, use and disclosure of the personal information on this form for the above purposes.

I acknowledge that I have read, understand and agree to follow the [SD42 Board Policy 10310 - Volunteers](#) and the procedures associated with it.

I acknowledge, understand and agree that School District No. 42 does not accept responsibility for any damage to the vehicle I will be using in the event of an accident, nor for deductible, loss of insurance discount or loss of use.

In consideration of School District No. 42 (Maple Ridge-Pitt Meadows) (“School District”) approving my services as a volunteer driver for the school district, and to the fullest extent permitted by law, I agree to waive and release the school district, the Ministry of Education and its and their officers, employees, board members, agents, volunteers and representatives (“Releasees”), of and from any and all claims, expenses, costs, damages or liabilities that I may incur and related to my services as a volunteer arising out of any cause whatsoever including negligence (the “Claims”). I further agree not to bring or cause any other person to commence legal proceedings seeking recovery for any such Claims from the Releasees, or any one or more of them.

ACCEPTED BY:

Driver’s Signature

Printed Name

Date

PRINCIPAL OR DESIGNATE APPROVAL:

Signature

Position

Date

*Note: The School District’s insurer provides excess Third-Party Liability coverage for individuals driving their own vehicle for school district business

***VOLUNTEER DOCUMENTATION - REVIEW & RETENTION POLICY:**

Volunteer Driver Application form: This documentation is to be retained in the school’s file and updated **each school year or when the information provided changes.** (SD42 Board Procedure 10310.2 (8.1))

Volunteer Driver’s Abstract: This documentation must be updated **every other school year or before, if the license has expired.** (SD42 Board Procedure 10310.2 (8.1))

All Documentation related to the volunteer’s history including application form, interview notes, criminal record check (if required), driver’s abstracts **will be held in a confidential file** in the office of the Principal or Program Manager for a **period of 7 years** after the end of the volunteer service. (SD42 Board Procedure 10310.1 (5))