

Manzanita Elementary School District

627 E. Evans-Reimer Road
Gridley, CA 95948

VOLUNTEER DRIVER POLICY

The Manzanita School District acknowledges the needed assistance by responsible volunteer drivers in order to provide transportation for numerous activities that otherwise would not exist without support. We sincerely appreciate this contribution. If you are transporting any child other than your own from the school to a school sponsored activity, you are considered a volunteer driver and must follow the process listed below.

In order to provide the best assurance to both the volunteer driver and the school district, the following agreements should be made:

1. The volunteer driver has met all the legal requirements for possessing a driver's license, has an excellent driving record, and is 21 years of age or over (preferably a parent of one of the students).
2. The car being driven is in excellent condition and repair.
3. The driver accepts the added responsibility that comes from carrying extra individuals and, therefore, is perhaps more conscious of all driving rules and regulations set forth by the State of California. The California Supreme Court has eliminated the protection of the former California Guest Law. Now a guest passenger may sue his host owner-driver.
4. The driver has an insurance policy that will act as the prime carrier for any liability incurred, with the following results and amount of coverage:
 - a. Bodily Injury Liability of not less than \$100,000 each person with \$300,000 each accident.
 - b. Property Damage Liability of a minimum of \$50,000 each accident OR combined single limit for Property Damage and Bodily Injury of \$300,000 for each accident.
5. The driver agrees to obtain from his/her insurance company a certificate of insurance indicating
 - a. Name of Company
 - b. Policy Number
 - c. Limits of Liability
 - d. Expiration Date

Secure a school roster of students going to the activity and returning with you. You may only transport students on the roster that was turned in to the office.

The district can offer assistance in the following ways:

1. The volunteer driver is covered by Worker's Compensation while serving as a volunteer worker for the district.

VOLUNTEER DRIVER INSTRUCTIONS

When using your vehicle to transport students on field trips or other school activities, please:

1. Be sure that you have registered with the district for such purposes and have a valid driver's license and current liability insurance at or above the minimum amount required by law for each occurrence.
2. Check the safety of your vehicle: tires, brakes, lights, horn, suspension, etc.
3. Carry only the number of passengers for which the vehicle was designed. If you have a truck or pickup, carry only as many passengers as can safely sit in the passenger compartment.
4. Require each passenger to use a safety belt.

All volunteer drivers must complete the "MANZANITA SCHOOL VOLUNTEER DRIVER REGISTRATION FORM", attach a copy of their certificate of insurance and turn them in to the office for authorization prior to departure. In case of emergency, keep all the children together and call the school at 530-846-5594.

VOLUNTEER DRIVER REGISTRATION FORM

Driver (circle one): Employee Parent/Guardian Volunteer

Name: _____ Date of Birth: _____

Address: _____ Driver's License No.: _____

Telephone No.: () _____ Expiration Date: _____

VEHICLE INFORMATION

Name of Owner:

_____ Year: _____

Address: _____ Make: _____

License Plate No.: _____ Registration Expires: _____

Seating Capacity: _____

INSURANCE INFORMATION

Insurance Company: _____ Policy No.: _____

Telephone No.: _____ Expiration Date: _____

Liability Limits of Policy: _____

DRIVER STATEMENT

I certify that I have not been convicted of reckless driving or driving under the influence of drugs or alcohol within the past five years and that the information given above is true and correct. I will check the safety of my vehicle: tires, brakes, lights, horn, suspension, etc. prior to departure. I will carry only the number of passengers for which the vehicle was designed. I will require each passenger to use a safety belt. I understand that if an accident occurs, my insurance coverage shall bear primary responsibility for any losses or claims for damages.

Name _____ Date _____

Please attach a copy of your certificate of insurance indicating:

1. Name of Company
2. Policy Number
3. Limits of Liability
4. Expiration Date