## Latrobe School District

## **VOLUNTEER PERSONAL AUTOMOBILE USE FORM**

[One Form Required for Each Driver to be Approved]

Thank you for volunteering your time, and your automobile, to help transport our Students to off-site events or activities. In order to protect the health and safety of our Students, our District requires that anyone (employee or volunteer) using their personal automobile to transport Students to and from sanctioned activities must receive prior approval. Before we can issue such approval, certain information must be obtained at least fifteen (15) days before you transport our Students. You must also agree to abide by certain rules regarding the operation of the vehicle as set forth below.

Date Received by District:			eceived by:		
Printed Nam	e Sig	gnature	Date		
not let anyone other than myself and authorized Students ride in the Vehicle. However, I may seek written permission from the District to allow another child of mine to ride in the Vehicle to a specific activity, event, or competition <u>if</u> the destination involves an activity, event or competition generally available to the public or, at my expense and with District permission, I can purchase admittance for such other child.					
unsafe de each Stu inspected	unsafe due to weather or other natural conditions. I will not transport Students unless I have a working seatbelt for each Student, with seatbelts to be used at all times by myself and all transported Students. The Vehicle(s) may be inspected by District representatives.				
1. I will not operate an automobile while impaired, whether due to alcohol, drugs (prescription or nonprescription) lack of sleep, or distraction of any kind. I will at all times comply with California law regarding proper operation of the Vehicle, including compliance with all speed limits and posted signs and placards.					
For the safety of	of our Students, in signing belonger	ow, you are also agre	eeing to the following rules	s and requirements:	
VEHICLE SA	FETY AND TRANSPORT	ATION PROCEDU	RES AND REQUIREMI	ENTS	
Vehicle(s) Yea Vehicle(s) Lice Insurance Carr Policy Number Liability Cover  We also requi your Driver's I required before (a) obtain a co check, and (c) pursuant to Insurance Carr if at all, only a	rand Expiration Date: rage Limits:  re a photocopy of (a) your I License or Insurance Policy e you will again be eligible to py of your Driver Record His contact your insurance compurance Code Section 11580.  In y resulting bodily injury o	xpire during the sch transport Students. story and status of y pany to confirm you 9(d), in the case of r property damage is exhausted throug	ool year, updated photoco By signing below, you are our Driver's License, (b) our insurance status. Also an accident, <b>your insuran</b> . The District's automobil the payment of covered	cy Declarations Page. Should pies showing their renewal are also authorizing the District to conduct a criminal background, please also be advised, that nee will provide the primary le liability coverage will apply claims. The District does not overage for your vehicle.	
Name of Drive					

THIS FORM TO BE HELD ON FILE IN THE MAIN OFFICE FOR A PERIOD OF ONE (1) YEAR FROM THE DATE OF THE CURRENT SCHOOL YEAR