

# VOLUNTEER DRIVER APPLICATION FORM 20\_\_\_\_-20\_\_\_\_ SCHOOL YEAR

*Geneva Christian School; 1745 Kaneville Rd.; Geneva, IL 60134 (630) 232-8533*

We often need help in transporting students on field trips. Our 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 to the school office. A new Volunteer Driver Application must be filled out each school year and must be completed even if you will only be driving your own child. **IMPORTANT: PLEASE ATTACH A PHOTOCOPY OF THE FOLLOWING**

1. Your current driver's license (copy back also if you have a four year extension)
2. The page from your car insurance policy(ies) listing the amount of coverage -- usually listed on the first page of your policy.
3. Your current vehicle insurance card

## SECTION I - VOLUNTEER DRIVER INFORMATION

Name: \_\_\_\_\_ Driver License # \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ Expiration date: \_\_\_\_\_

Address: \_\_\_\_\_

Car Model/Year#1 \_\_\_\_\_ Car Model/Year#2 \_\_\_\_\_

Number of working seat belts in car #1 \_\_\_\_\_ #2 \_\_\_\_\_

License Plate number for car #1 \_\_\_\_\_ #2 \_\_\_\_\_

The school requires volunteer drivers to have a minimum amount of liability insurance. (1) \$100,000 liability per person for bodily injury; (2) \$300,000 liability per incident for bodily injury for all vehicle occupants; and (3) \$50,000-\$100,000 liability for property damage. Amount on this (these) cars:

Car #1 Insurance Co. \_\_\_\_\_ Policy # \_\_\_\_\_

(1) \$ \_\_\_\_\_ (2) \$ \_\_\_\_\_ (3) \$ \_\_\_\_\_

Uninsured/underinsured motorist coverage? Yes \_\_\_\_\_ No \_\_\_\_\_

Car #2 Insurance Co. \_\_\_\_\_ Policy # \_\_\_\_\_

(1) \$ \_\_\_\_\_ (2) \$ \_\_\_\_\_ (3) \$ \_\_\_\_\_

Uninsured/underinsured motorist coverage? Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_ Yes \_\_\_\_ No Are you licensed to drive a commercial vehicle?

\_\_\_\_ Yes \_\_\_\_ No Have you been in an accident in the last 3 years? If you answered 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 3 years? If you answered YES, please describe the infractions on another sheet of paper and attach it to this form.

\_\_\_\_ Yes \_\_\_\_ No Have you been convicted for DWE/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? (Note: Our school will not be able to use volunteers with a "yes" answer even if the incident took place before the person became a Christian.)

\_\_\_\_Yes \_\_\_\_No Have you ever been convicted of a felony or misdemeanor involving the abuse of children? (Details of the conviction are needed and could prohibit your eligibility to drive depending on the details of the conviction.)

## SECTION II - REQUIREMENTS FOR VOLUNTEER DRIVERS

I certify that for the current school year:

- \* I possess a valid \_\_\_\_\_(state) driver's license.
- \* I will contact my insurance agent to ascertain if there are any liability policy limits or exclusions regarding transporting other students of faculty members on a field trip that might affect my ability to meet the qualifications for a volunteer driver.
- \* I will maintain the minimum insurance coverage required by the school for volunteer vehicles for the vehicles(s) listed in Section I and only volunteer to drive when such insurance policies and coverage are in force.
- \* I understand that in case of any type of accident, injury, or vehicle damage, the school's liability policy does not provide primary or direct insurance on my vehicle. The school's insurance will take effect only after my personal auto insurance limits are exhausted. (Note: This is the only coverage the most nonprofit organizations can provide because of the impossibility of their affording or even obtaining primary or direct coverage on the vehicles of volunteer drivers.)
- \* I will advise the 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.
- \* Students riding in my vehicle(s) will be seated and in both the front and back seat will be secured with individual working seat belts. (No double belting of children is permitted.) I understand that no younger children will be seated in the front seat if the air bag can not be disabled.
- \* To my knowledge, my vehicle is in safe operating condition (brakes, tires, etc.)
- \* I will read and follow the Driver and Chaperone Instructions sheet for the field trip and the instructions at the top of the field trip permission form.
- \* I will notify school personnel if I no longer wish to drive or if I wish to be removed from the Approved Driver List.
- \* I know that I can continue to choose the field trips I can drive for by indicating on the field trip permission form.

\*\*\* I will not use my cell phone while driving my car during a field trip. If cell phone use is needed due to an emergency, I will stop my car or pull over into a stopped position before I use my cell phone.

## SECTION III - 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.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## SECTION IV - SCHOOL ADMINISTRATION APPROVAL

\_\_\_\_\_Approved \_\_\_\_\_ Not approved for addition to the school's Approved Driver's List

Administrator's Signature \_\_\_\_\_ Date: \_\_\_\_\_