



November 2015

Lethbridge School Division Employee or Volunteer Driver Authorization

Form 700.4.1

SCHOOL NAME: SCHOOL YEAR: DRIVER'S NAME: PHONE NUMBER: DRIVER'S ADDRESS:

Applications shall be approved only when the driver possesses a valid, appropriate driver's license. The principal may authorize the use of private vehicles to transport students if the information provided below indicates that the driver has a sufficiently safe driving record.

DRIVER'S LICENSE NUMBER: CLASS: EXPIRY DATE: Day / month / year

Has your driver's license been suspended in the last three years? Yes No If Yes, please provide date of reinstatement:

Have you been convicted of an offence under the Traffic Safety Act, or for any motor vehicle-related offence under the Criminal Code of Canada during the last three years? Yes No If Yes, please identify the offence(s) here:

Have you been involved in any accidents during the last three years? Yes No If Yes, please give details:

Insurance Related Considerations:

- 1. The Board requires that the vehicle owner maintain, at all times, insurance in an amount of not less than \$1,000,000 in respect of liability or injury or death of any students who are passengers in the vehicle the volunteer driver is operating.
2. In case of an insurance claim (i.e., third party damage and/or personal injury) the vehicle owner's automobile liability insurance applies before that of the school Board.
3. Additional automobile liability insurance protection is provided under the school Board's comprehensive general liability insurance policy for authorized drivers transporting students in privately-owned vehicles on an approved school activity or function. This insurance is only for an amount in excess of the limit of liability provided by the vehicle owner's liability insurance policy.
4. Damage to any vehicle, including the owner's, is the responsibility of the volunteer driver and not the Board.
5. The owner of the vehicle is expected to inform his/her insurance agent of the intention to use the vehicle and to act as a driver for Board activities, and to enquire whether a passenger endorsement is required to do this. As this driving is classified as occasional, most insurers do not require that a passenger endorsement be added to the policy or that additional premiums be paid.

VEHICLE: OWNER'S NAME: Make / Model / Capacity (including driver) OWNER'S ADDRESS: OWNER'S PHONE: INSURANCE ON VEHICLE - COMPANY: POLICY No.: (OR COPY OF PINK SLIP ATTACHED) INSURANCE AGENT: LIABILITY LIMIT: \$

COMMITMENTS - By submitting this application to become an employee or volunteer driver for the Lethbridge School Division:

- I undertake to ensure that the vehicle used to transport students is in safe operating condition.
I agree to operate the automobile referred to herein in a safe manner, to abide by all applicable laws at all times while I am transporting students, to limit the number of passengers to the number of seat belts which are useable, to use appropriate child safety seats as required, and to follow Transport Canada guidelines that recommend that children under the age of 12 should be seated in the back. I also agree to refrain from smoking while a student is in the vehicle and to comply with the directions of teachers or agents of the Lethbridge School Division.
I undertake to report to the school principal all accidents and any suspension of my license or change in my insurance status which may occur after the date of this authorization while it remains in force (i.e., this school year). All student transportation will adhere to the Traffic Safety Act and Lethbridge School Division Transportation and Safety Maintenance Program.
I have advised the insurance company that I have applied to serve as an employee or volunteer driver and enquired whether a passenger endorsement is necessary. I undertake to maintain, at all times, personal liability and indemnity insurance equal to or greater than the Board minimal limit noted above.
I am aware that my name may be made available to parents of the students who I am driving.
I authorize Lethbridge School Division to conduct a random driver's abstract check at their expense.

I accept the foregoing undertakings and certify that the information contained in this application is correct to the best of my knowledge:

Driver: Vehicle Owner:

Parent/Guardian (if driver is under 18 years of age):

FOR OFFICE USE ONLY

The above-named driver is authorized to assist the school during the current school year. The assistance is appreciated.

Signature of Principal/Designate: Date: