

HOCKINSON SCHOOL DISTRICT COACH/VOLUNTEER DRIVER CHECKLIST

Name of Driver: _____

Date: _____ School: _____

Purpose of Trip(s):
(Season/Year for Coaches) _____

Trip Is To: _____

Maximum Number of Students To Be Transported In Coach/Volunteer's Vehicle: _____

DRIVER SCREENING/INSURANCE REQUIREMENTS (INCLUDE A COPY OF DRIVER'S LICENSE AND CURRENT INSURANCE CARD)

VEHICLE YR/MAKE/MODEL: _____ LICENSE NO: _____

Please respond to each item by checking either a "YES" or "NO" answer:

YES NO I am older than 21 years of age.
 YES NO I have a valid Washington State driver's license.
License # _____ Expiration Date: _____ Date of Birth: _____

YES NO I have not had my driving license privilege suspended or revoked in the preceding three years.
 YES NO I have had no vehicle moving violations or at-fault accidents in the last three (3) years. If you have had any, please list:

YES NO I have not been convicted or undergone a deferred prosecution for any misdemeanor, gross misdemeanor, or felony.
 YES NO I carry minimum auto liability limits of \$100,000 per occurrence and \$300,000 aggregate combined single limits of liability (or \$100,000/\$300,000 Bodily Injury; \$50,000 Property Damage) and uninsured motorist coverage.
Company: _____ Policy #: _____

YES NO I am aware that, in the event of an accident while on a school-related activity, any claims will be tendered to my personal automobile insurance company, and my insurance is primary.

YES NO I understand that when transporting students, their safety is the utmost priority and I will obey all traffic laws at all times.

YES NO I will not be transporting anyone other than participants or others that have an official role for the district in the school-related function.

YES NO I agree to report to the district immediately any changes in the status of my drivers license, driving record or ability to transport students during the school year.

YES NO There is a working seat belt for the driver and each passenger, and I enforce the wearing of seat belts by all.

YES NO My vehicle's brakes, tires, lights, and mirrors are in good working order.

The above information is true and accurate to the best of my knowledge. I hereby give my permission for a copy of my personal Motor Vehicle Report to be ordered and used in consideration of my transporting students during field trips.

Signature of Volunteer Driver

DATE

Signature of Administrator/Designee

DATE

APPROVED
 DENIED