



# GVSD VOLUNTEER DRIVER AUTHORIZATION APPLICATION

To be completed when volunteer drivers are used

Driver's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Cell #: \_\_\_\_\_

Address: \_\_\_\_\_ E-mail: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Class: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Applications may be approved only when the driver possesses a valid, appropriate driver's license.

Vehicle(s): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Make / Model / License Plate No. / Seating Capacity (Including Driver)

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Make / Model / License Plate No. / Seating Capacity (Including Driver)

### COMMITMENTS

By submitting this application to become a volunteer driver for the school board:

1. I undertake to ensure that the vehicle used to transport students is in safe operating condition.
2. I agree
  - a) to operate the automobile referred to herein in a safe manner
  - b) to abide by all applicable laws at all times while I am transporting students
  - c) to limit the number of passengers to the number of useable seat belts
  - d) to require proper use of occupant restraint systems (i.e., seatbelts, head restraints, airbags, seat position), and
  - e) to comply with the directions of teachers or agents of the school board.
3. I undertake to report to the school principal 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.
4. I undertake to maintain, at all times, appropriate personal liability and indemnity insurance.
5. I understand that the board requires that the vehicle owner maintain, at all times, valid automobile **Third Party Liability Insurance** as required under Manitoba legislation in respect of liability for injury or death of any students who are passengers in the vehicle the volunteer driver is operating.
6. I understand that 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.
7. I understand that 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. This insurance is **only** for an amount in excess of the limit of liability provided by the vehicle owner's liability insurance policy.
8. I accept the foregoing undertakings and certify that the information contained in this application is correct to the best of my knowledge:

Signature of Driver: \_\_\_\_\_

### FOR OFFICE USE ONLY

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

Signature of Principal/Designate: \_\_\_\_\_ Date: \_\_\_\_\_