

AUBURN UNION SCHOOL DISTRICT

255 Epperle Lane, Auburn, CA 95603

DRIVER CERTIFICATION (T-1)

DRIVER INFORMATION

Name _____ Date of Birth (mm/dd/yy) _____
Address _____
Driver's License Number _____
Phone Number _____

VEHICLE INFORMATION

Name of Owner _____
Address _____
Year _____ Make _____ License Plate No _____
Registration Expires (mm/dd/yy) _____ Total Number of Usable Safety Belts _____

INSURANCE INFORMATION

Insurance Company _____
Policy Number _____ Expiration Date (mm/dd/yy) _____
Name of Insurance Agent _____ Phone Number _____
Liability Limits of Policy _____

NOTE: The minimum acceptable limits for privately owned vehicles are \$100,000 bodily injury and \$50,000 property damage. If you transport students often, it is recommended that your bodily injury coverage be \$300,000.

DMV DRIVER RECORD PRINTOUT

Information Request Date (mm/dd/yy) _____
Health Questionnaire Expires _____
Restrictions _____
License Status _____
Departmental Actions _____
Convictions _____
Failures to Appear _____
Accidents _____

IN THE EVENT OF AN ACCIDENT OR EMERGENCY, KEEP ALL THE CHILDREN TOGETHER AND CALL 911 IF NECESSARY, THEN THE SCHOOL OFFICE:

Alta Vista	885-7066	Auburn EI	887-1958	E.V. Cain	823-6106
Rock Creek	885-5189	Skyridge	885-7019	District Office	885-7242

- OFFICE:**
1. Please copy the front of this form for the diver to keep in his/her car.
 2. Keep the original on file in the school office.

VOLUNTEER DRIVER'S INSTRUCTION AND LIABILITY FORM

It is understood and agree that anyone who is going to be driving Auburn Union School District students to any sanctioned Auburn Union School District activity will be aware of the following:

The driver must submit the following information to the school office two weeks prior to the field trip:

1. Driver Certification Form (T-1)
2. District Waiver of Liability Form (below)
3. A copy of your valid Driver's License with expiration date
4. A copy of your insurance policy that states your "limits of liability" (Minimum acceptable limits are \$100,000 bodily injury and \$50,000 property damage)
5. A copy of your Driver Record Printout (available from California DMV online services for \$2.00)

A thorough safety check of your vehicle must be conducted by you or a mechanic prior to the trip (tires, brakes, lights, horn suspension, turn signals, mirrors, etc.)

Carry only the number of passengers for which your vehicle was designed. **Students are not allowed to occupy the front passenger seat of vehicles that are equipped with AIR BAGS in that particular area.**

If you have a truck or pickup, carry only as many as can safely sit in the passenger compartment.

Each passenger is required to wear a safety belt.

Students are not to be left unattended in the vehicle at any time.

Effective January 1, 2005 , booster seats are required for children up to 6 years old or 60 pounds. No exceptions. In addition to a booster seat, all children up to 6 years old or 60 pounds are required to ride in the backseat unless:

- there is no rear seat
- the rear seats are side-facing jump seats
- the booster seat cannot be properly installed in the rear seat
- all rear seats are already occupied by children under the age of 12 years
- medical reasons necessitate that the child not ride in the rear seat

Parents who transport only their own child(ren) on school sponsored field trips and activities are required to comply with these Auburn Union School District regulations as well.

Drivers are required to complete/update Driver Certification and Liability forms annually OR upon renewal/changes in driver's license carrier, coverage, driving record, or policies. Current policy and expiration dates must be on file in the school office as per Board Policy 3541.1.

DISTRICT WAIVER OF LIABILITY

"I have read the above information and am aware of the policy regarding my responsibility when driving students.

I certify that I have not been convicted of reckless driving or driving under the influence of drugs or alcohol within the past five years, have never been convicted of a violent or serious felony, and that the information given above is true and correct. I understand that if an accident occurs, my insurance coverage shall bear primary responsibility for any losses or claims for damages.

I certify that I will ensure that all children will be restrained using the appropriate passenger restraint systems."

Signature _____ Date _____