

LIBERTY CHRISTIAN SCHOOL

PRIVATE VEHICLE REQUIREMENTS

Liberty Christian School acknowledges the need for responsible private drivers to provide transportation services for numerous school activities that otherwise would not exist without volunteer support.

To ensure that private transportation services will be provided in a safe, efficient and cost effective manner, the following requirements will be met:

1. The driver will be 21 years of age or over and possess a valid California driver's license.
2. The driver will be in good physical condition, free of medications that may affect operation of the vehicle.
3. The vehicle will be in excellent condition and repair.
4. The vehicle will have a seat belt for each student being transported, and the driver will require them to use it. Limitation on number of students transported is:

6-passenger sedans	:	5 passengers + driver
Station Wagons (3 seat)	:	8 passengers + driver
Minivans	:	6 passengers + driver
Vans	:	9 passengers + driver
Trucks	:	1 or 2 passengers + driver (no passengers outside of cab)

NO TRANSPORTING OF MORE THAN NINE PASSENGERS

5. The driver accepts the added responsibility that comes from carrying extra individuals and, therefore, will be conscientious in obeying all driving rules and regulations set forth by the State of California. The California Supreme Court has eliminated the protection of the former California Guest Law; therefore, a guest passenger may sue his/her host owner/driver.
6. The driver must have an automobile liability insurance policy and is also responsible for physical damage to their vehicle. Liberty Christian Schools' liability insurance does not extend protection to the private driver unless the driver has been deemed a volunteer/employee by Liberty Christian Schools. If deemed such, Liberty Christian Schools' liability insurance serves only as excess insurance over the driver's primary insurance.

Required minimum limits of coverage:

Bodily Injury \$ 100,000 each person \$ 300,000 each occurrence
 Property Damage \$ 50,000 - 100,000 each occurrence
 Bodily Injury & Property Damage \$ 300,000 combined limit

Volunteer Driver Application Form _____/_____. School Year

Liberty Christian School
2970 Hartnell Ave.,
Redding, CA 96002
530-222-2232

Section 1 – Volunteer Driver Information

Name: _____ Driver License # _____ Exp _____

Address: _____

Phone # (Home) _____ (Cell) _____ (Work) _____

Car Model/Yr #1 _____ License plate # _____ # of Seat Belts _____

Car Model/Yr #1 _____ License plate # _____ # of Seat Belts _____

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 occupants; and (3) \$50,000 liability for property damage.

Amount of Coverage:

Car #1: Insurance Co.: _____ Policy # _____

(1) \$ _____ (2) \$ _____ (3) \$ _____

Uninsured/underinsured motorist coverage? Yes: _____ No: _____

Car #2: Insurance Co.: _____ Policy # _____

(1) \$ _____ (2) \$ _____ (3) \$ _____

(2) Uninsured/underinsured motorist coverage? Yes: _____ No: _____

Are you licensed to drive a commercial vehicle? Yes _____ No _____

Have you been in an accident in the last three years? Yes _____ No _____

If you answered YES, please describe the incident and its cause on another sheet of paper and attach to this form.

Have you been ticketed for moving violations within the last three years? Yes _____ No _____

If you answered YES, please describe the infractions on another sheet of paper and attach to this form.

Have you ever been convicted for DUI/DWI of alcohol or drugs, or had your license suspended for moving violations, hit and runs, eluding an officer, reckless or negligent operation of a vehicle, or driving under suspension or revocation? Yes _____ No _____

(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)

Section II – Requirements for Volunteer Drivers

I certify that for the _____/_____ school year:

- I possess a valid _____ (state) driver's license. **Please attach a photocopy of your driver's license and the declarations page of your car insurance policy(ies), showing coverage limits.**
- I will contact my insurance agent to ascertain if there are any liability policy limits or exclusions regarding transporting other students or 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 coverages required by the school for volunteer vehicles for the vehicles listed in Section I and only volunteer to drive when such insurance policies and coverages 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 that most non-profit 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, nonrenewal 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 seatbelts. (No double belting of children is permitted.) As required by state law, I will have a child restraint seat for each child under age 8 and under 4'9" tall.
- To my knowledge, my vehicle is in safe operating condition (brakes, tires, etc.)

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: _____

Please attach a copy of your Declaration Sheet from your insurance company and a copy of your Driver's License.

Section IV – School Administrations Approval

_____ Approved _____ Disapproved

Administrator's Signature _____ Date: _____