

Employee & Volunteer Use of Personal Automobile

In order to protect the health and safety of our Students, our District requires that anyone (employee or volunteer) using their personal automobile for District business or to transport Students to and from sanctioned activities must receive prior approval. Before we can issue such approval, certain information must be obtained **at least fifteen (15) days before you transport our Students**. You must also agree to abide by certain rules regarding the operation of the vehicle as set forth below.

Complete the forms and submit the required documents to your school site or department administrator.

Required Documents

- School Driver Certification Form
- Current Driver's License
- Insurance Policy Declarations Page
- Employee- Employer DMV Pull Authorization
- Non-Employee- Copy of DMV H6 report

Should your Driver's License or Insurance Policy expire during the school year, updated photocopies showing their renewal are required before a new certification can be issued.

Pursuant to Insurance Code Section 11580.9(d), in the case of an accident, **your insurance will provide the primary coverage for any resulting bodily injury or property damage**. The District's automobile liability coverage will apply, if at all, only after your insurance coverage is exhausted through the payment of covered claims. The District does not cover, nor is the District responsible for, comprehensive, uninsured motorists, or collision coverage for your vehicle.

VEHICLE SAFETY AND TRANSPORTATION PROCEDURES AND REQUIREMENTS

For the safety of our Students, in signing below, you are also agreeing to the following rules and requirements:

1. I will not operate an automobile while impaired, whether due to alcohol, drugs (prescription or nonprescription), lack of sleep, or distraction of any kind. I will at all times comply with California law regarding proper operation of the Vehicle, including compliance with all speed limits and posted signs and placards.
2. I will not transport Students in a Vehicle I have reason to believe may be mechanically unsafe or that may become unsafe due to weather or other natural conditions. I will not transport Students unless I have a working seatbelt for each Student, with seatbelts to be used at all times by myself and all transported Students. The Vehicle(s) may be inspected by District representatives.
3. I am over the age of 21 and will be the sole driver of the Vehicle for any given activity, event, or competition. I will not let anyone other than myself and authorized Students ride in the Vehicle.

X _____
Signature

Date

After an Auto Accident

Instructions for Employees/Volunteers and Supervisors

Employees

District employees and volunteers, whether operating a district vehicle or their own, must follow the steps in the *After an Accident* brochure if involved in an automobile accident. The brochure should be located in the vehicle. If you don't have one, please download and/or print as many copies you need (On District web site under Risk Management, School Driver Resources).

Supervisors

1. A call comes in – the driver reports an accident.
2. Make sure driver has called 911.
3. Supervisor go to the scene. Get as much info as possible.
 - a. Don't interfere with what the driver is required to do by police at the scene.
4. Complete the form in the After an Accident brochure located in the vehicle.
 - a. Make sure you get all the info on the other driver, passengers, vehicle info etc.
5. Determine if the driver is operating a commercial vehicle:
 - a. If Yes, go to step 6 for DOT - drug and alcohol testing (DAT).
 - b. If No, simply document.
6. Call Transportation to make arrangements for DOT – DAT testing
7. Call Transportation for towing instructions.
8. Return the report to Risk Management as soon as it is completed. Attach the completed *After an Accident* brochure.

All forms are for internal use only, and are not to be duplicated or distributed. They are part of an investigation. Refer any inquiries from the public regarding an accident to the Risk Management Department.

X _____
Signature

Date