



REDLANDS UNIFIED SCHOOL DISTRICT SCHOOL DRIVER CERTIFICATION FORM

Driver's Name (as shown on driver's license)

Driver's License Number

Driver's Address

Driver's Telephone Number

Reason for Transporting Student

School Site

Driver's License Expiration Date

It is understood that this trip is subject to the following conditions:

1. The trip must be optional and students under 18 cannot attend without prior consent of the parent or guardian. An appropriate District Consent Form for each participant must be completed.
2. The driver must hold a valid California driver's license (**LEGIBLE COPY OF LICENSE MUST BE ATTACHED**).
3. **If Driver is not a District Employee**, the driver must Provide Risk Management a current Driver's License record (Obtained from the DMV Office).
4. **A District Employee** must sign a DMV Pull Release form (**LEGIBLE COPY MUST BE ATTACHED**).
5. The District's liability insurance does not cover damage to private vehicles or passengers, but merely protects the District in the event of a claim of negligence in organizing the trip. The driver's personal automobile insurance policy would provide primary coverage. The driver must be covered by an automobile insurance policy with minimum coverage of: Public Liability & Bodily Injury - \$100,000/300,000 per accident; Property Damage - \$50,000 per accident; Medical Payments - \$2,000 (**DOCUMENTATION SHOWING COVERAGE LIMITS AND POLICY PERIOD MUST BE ATTACHED**).
6. Seat restraints must be available for all passengers. Transporting students is limited to vehicles which meet the requirements for transporting passengers contained in the motor vehicle code of the state of California. Transporting students in pick-up trucks or vans equipped with sub- standard passenger accommodations is expressly prohibited. Vehicles must not be overloaded.
7. Vehicles must be registered in California and be in proper mechanical condition.

Authorization is hereby requested for the driver listed above to use the following private vehicle to transport students:

Automobile Make/Model

Number of Seat Belts in Automobile

Automobile License Number

Name of Insurance Company

Policy Number

Effective Dates of Ins. Policy

I agree to accept the responsibilities involved with this trip and certify that I will comply with the conditions listed above.

Driver's signature (as it appears on driver's license)

Authorization is hereby granted for _____ to transport a maximum of _____ in his/her private

automobile. **Site Administrator's Signature:** _____ Date: _____

This authorization is only valid from _____ to _____.

District Office Approval/Signature

Risk Management Supervisor
Title

Date

Original approved form must be in the possession of the driver at all times.

(SchoolDriverCert Form-06/052018)