

PARENT SURNAME: _____

VOLUNTEER DRIVER FORM

Form 6031-09

STUDENT NAME: _____

1. I will be driving students from MARK R. ISFELD SECONDARY (school name) for activities on various dates.
2. I have provided the Principal with the following (please check):
 - _____ a) Driver's abstract:
Call ICBC at 1-800-950-1498 (press "1" when prompted) to request a Public Driver's Abstract, to be faxed to the school at (250) 334-0659.
 - _____ b) Criminal Record Review form (overnight travel)
 - _____ c) A copy of my driver's licence
 - _____ d) Proof that the vehicle I am driving has at least \$1,000,000 in third party liability insurance
3. To the best of my knowledge, the vehicle I will drive is in sound mechanical condition and is safe for transporting students.
4. I will ensure that each passenger will wear a seatbelt and that the seatbelt will be in good working order.
5. For trips to Mount Washington, I certify that the vehicle I will drive has chains that can be used if necessary.

Driver's Name: _____

Driver's Signature: X _____

PHONE NUMBER: H _____ C _____

Date: _____

Principal's Signature: _____

Date: _____

Personal information contained in this form is collected and protected under the authority of the *Freedom of Information and Protection of Privacy Act* for the purpose of participating in school trips. If you have any questions about this form, please contact your school administrator.

For a complete copy of Policy 6031 (Student Travel) and all associated documents, refer to the district website <<http://sd71.bc.ca/sd71/sbo/policy.php>>.

