

**HOLLISTER SCHOOL DISTRICT  
 AUTHORIZED DRIVER FORM  
 FIELD TRIP BY PRIVATE VEHICLE**

Field Trip destination: _____
Grade: _____

**Dear Parent/Volunteer**

The following information is required if you will be available to assist in transporting students on field trips. Please fill out and sign this form and return to the school office.

Driver's Name:	
Insurance Company:	
Expiration Date:	Policy #
California Driver's License #: (attach copy)	Expiration Date:
Mobile Phone # (        )	
<b>Required for emergency contact and MUST be with you during field trip.</b>	

1.     **Insurance Minimum Requirements (Attach Copy)**  
 I carry at least the minimum Bodily Injury/Property Damage liability insurance required in California. I understand that whenever I use my private vehicle to provide transportation for District-sponsored events:
  - a)     The District **DOES NOT PROVIDE** collision insurance for my private vehicle.
  - b)     The District **DOES** provide secondary public liability insurance for property damage and bodily injury for my private vehicle. If a loss should occur, my insurance policy will be "PRIMARY" and the District's will be "SECONDARY".
  
2.     **Driver Record - (Attach Copy)**  
 This can be obtained through the DMV Website. *Homepage --- Online Services --- More Online Services --- Driver Record Request.* Provide a recent (within 2 weeks) printed *non official* copy.
  
3.     **Number of Passengers**  
 The number of passengers to be transported in a private vehicle will not exceed the number of seat belts available for their use. The driver must insure that each passenger has fastened his/her seat belt before placing the vehicle in motion. Also, the number of passengers being transported must not be so great as to interfere with the drivers' ability to operate the vehicle safely. ***Passengers under 8 years of age or under 4'9" must be in appropriate car seats and shoulder straps.***

By signing below I certify that all information in the MVR (Motor Vehicle Record) is correct and there have been no recent citations or accidents that are not reported. I certify that my vehicle is now and will be in good mechanical condition whenever it is used to provide transportation and I will abide by all traffic laws and operate vehicle in a safe manor. There will be no financial charges to the District or to the students for pupil transportation provided by private vehicle. I have read and understand the above terms and agree to abide by them whenever I provide student transportation for District-sponsored events.     I can transport \_\_\_\_\_ students.

Date:	Parent/ Volunteer Signature:
Student's Name:	Teacher:

Principal/Site Administrator Use:

<input type="checkbox"/> Megan's Law	<input type="checkbox"/> Insurance Minimum Requirements
<input type="checkbox"/> Driver Record	Principal/Site Administrator Signature/Date