VOLUNTEER DRIVER AUTHORIZATION APPLICATION: ST. PIUS X SCHOOL

Driver's Name:	
Address:	E-mail:
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Applications may be approved only when the driver possesses a valid, appropriate driver's license and is able to respond No to questions concerning convictions and suspensions over the last three years. Driver's License Number: Class: Expiry Date: Has your driver's license been suspended in the last three years? Yes □ No □	
Driver's License Number:Class.	rs? Yes No No
If Yes, please provide date of reinstatement: Have you been convicted of an offence under the Highway Trai Criminal Code of Canada during the last three years? Yes If Yes, please identify the offence(s) here: Were you found responsible/partly responsible for any motor ve	ffic Act, or for any motor vehicle-related offence under the
Were you found responsible/partly responsible for any motor vi	, , , , , , , , , , , , , , , , , , , ,
Insurance Related Considerations: 1. St. Pius X School requires that the vehicle owner maintain, at all times, valid automobile Third Party Liability Insurance as required under BC legislation in respect of liability for injury or death of any students who are passengers in the vehicle the volunteer driver is operating. 2. In case of an insurance claim (i.e., third party damage and/or personal injury) the vehicle owner's automobile liability insurance applies before that of the school board. 3. Additional automobile liability insurance protection is provided under the school board's comprehensive general liability insurance policy for authorized drivers transporting students in privately-owned vehicles on an approved school activity. This insurance is only for an amount in excess of the limit of liability provided by the vehicle owner's liability insurance policy. 4. Damage to any vehicle, including the owner's, is the responsibility of the volunteer driver and not the school board.	
Vehicle:/ Make / Model / License Plate No. / Seating Capacity (Including Drive	r) /
Owner's Name:	
Owner's Phone: (H) (W)	(C)
Owner's Address: Owner's Phone: (H)	Registration No.:
COMMITMENTS By submitting this application to become a volunteer driver for St. Pius X School:	
1. I undertake to ensure that the vehicle used to transport students is in safe operating condition.	
I agree a) to operate the automobile referred to herein in a safe manner	
b) to abide by all applicable laws at all times while I am transporting students	
 c) to limit the number of passengers to the number of useable seat belts d) to require proper use of occupant restraint systems (i.e., seatbelts, head restraints, airbags, seat position, 	
booster seats) and	
a) to a small with the directions of teachers or agents of St. Pius X School.	
3. I undertake to report to the school principal all accidents and any suspension of my license or change in my insurance status which may occur after the date of this authorization while it remains in force.	
4. Landa de la completa del completa de la completa de la completa del completa de la completa del completa de la completa de la completa del completa de la completa del	
5. I accept the foregoing undertakings and certify that the information contained in this application is correct to the	
best of my knowledge:	
Signature of Driver:	
Signature of Vehicle Owner:	
FOR OFFICE USE ONLY	
The above-named driver is authorized to assist the school during the current school year. The assistance is appreciated.	
Signature of Principal/Designate	Date: