



7. I will not smoke when transporting students in my vehicle, and I will not make personal stops (i.e. cleaners, drug store, etc.).
8. I understand that the district expects me to drive safely and to strictly follow all traffic laws, including obeying all speed limits.
9. I will not operate my vehicle under the influence of prescription drugs and/or other medication (i.e. allergy medication) that may impair my ability to operate a motor vehicle.
10. I will not have pets in my vehicle when it is being used to transport students.
11. Vehicle Safety: As a driver of a car transporting students, you are responsible for providing a safe vehicle, including the following:

- Minimum tread on tires (not bald or worn)
- Seat belts for all passengers
- Working lights, turn signals, mirrors
- Appropriate spare tire, highway flares, flashlight
- Normally operating engine
- Normal interior & exterior
- Normal mechanical system, including steering and brakes

I understand that my insurance will be responsible in the event of a vehicular accident. By my signature below, I verify and certify under penalty of perjury that my statements are true and correct.

My student's name is \_\_\_\_\_  
(please print)

Signature of volunteer: \_\_\_\_\_

Date \_\_\_\_\_

Print name of volunteer: \_\_\_\_\_

District Office Verification \_\_\_\_\_

**PLEASE COMPLETE ALL SPACES**

**THIS FORM WILL BE KEPT ON FILE FOR FUTURE TRIPS.**

School Board Adopted: September 8, 2005