



## FIELD TRIP DRIVER PACKET

Please complete the attached forms and return them to the office with a copy of your driver's license and a copy of your Limits and Coverage page from your insurance company. (This is the page that shows your limits of liability. The limits must meet or exceed the limits stated on the reverse of the Vehicle Use Form.) Please remember that ALL parent drivers must be fingerprinted before they can drive. You MUST see the front office for fingerprinting paperwork.

All paperwork and fingerprint clearance must be in and approved by the Executive Director at least one week prior to a field trip to be eligible to drive. You cannot drive or attend a field trip without fingerprint clearance. Please keep in mind that it can take weeks for your fingerprints to clear, so you should not wait until the last minute to be fingerprinted.

If you have any questions, please feel free to contact the office at 805-495-7037.

VENTURA COUNTY SCHOOLS BUSINESS SERVICES AUTHORITY

**EMPLOYEE/VOLUNTEER  
PERSONAL VEHICLE USE INSTRUCTIONS**

Drivers and private vehicles being operated for District purposes must meet or exceed the following guidelines:

1. All drivers must be approved by the school or site administrator.
2. Each driver must:
  - (a) possess a valid driver license.
  - (b) be at least 21 years of age.
3. The driver must own the vehicle in use, unless the vehicle is rented.
4. All drivers will enforce reasonable travel speed in accordance with federal, state, and local laws in all motor vehicles.
5. The vehicle must not be designed, used, or maintained to carry more than 10 passengers including the driver. Otherwise, a commercial driver license is required, and the vehicle must be a school bus or student pupil activity bus as defined in the vehicle code.
  - (a) In no case shall the number of passengers, including driver, exceed the number of available seat belts.
  - (b) Drivers must ensure that required seat belts and/or child passenger restraint systems are properly used. Child passenger restraint systems are required for children under six (6) years of age *or* under 60 pounds.
  - (c) All passengers must wear his/her own seat belt. Seat belts are not to be shared.
  - (d) Passengers will only ride in the cab of a truck if trucks are used.
6. Personal Vehicle Use Form must be completed and on file before each trip is taken.
  - (a) District employees must complete a new form at the beginning of each semester.
  - (b) Proof of insurance must be attached to this form.
  - (c) A copy of a valid driver license must be attached to this form.
7. All vehicles must be covered by liability insurance. Minimum liability insurance coverage limits are:

Each Person:	\$100,000	Each Accident:	\$300,000
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8. The site administrator/program director or designee must approve, in advance, trip routes to points outside of the District in excess of ten (10) miles.
9. The limit on the distance of transporting students in private vehicles shall be a radius of \_\_\_\_ miles.  
*(Line 9 does not apply to VCSBSA staff.)*
10. Use of personal vehicles where hazardous road conditions exist is prohibited. This includes hazardous conditions declared by California Highway Patrol, or other City, County, State, or Federal agencies authorized to monitor road conditions.
11. Prior to departure, the driver shall:
  - (a) Inspect the vehicle for safety: tires, brakes, lights, horn, etc.
  - (b) Follow and enforce all safety recommendations of the vehicle manufacturer.
  - (c) Follow the most direct route, and avoid unnecessary stops.
  - (d) Do not carry non-District personnel, non-students, or other "guests" as passengers.

**VENTURA COUNTY SCHOOLS BUSINESS SERVICES AUTHORITY  
EMPLOYEE/VOLUNTEER PERSONAL VEHICLE USE FORM**

**VEHICLE USE**

District	Destination
Start Date	End Date

**DRIVER**

Driver Name	Birth Date
Street Address	Telephone #
Driver License #	Expiration Date
Driving Restrictions	

**VEHICLE**

Year/Make of Auto	Model	Vehicle License #
Insurance Carrier	Agent	Telephone #
Public Liability (Each Person) \$	Public Liability (Each Accident) \$	Property Damage \$
Policy Expiration Date	Assigned Risk Policy? <input type="checkbox"/> Yes <input type="checkbox"/> No	

**ACKNOWLEDGEMENT**

I certify the above information is correct and the insurance coverage is in force. I understand I must have liability insurance coverage in force and agree to advise VCSBSA, in writing, of any changes in the above information. I further certify that the above vehicle is mechanically safe, and that I have read and understand the VCSBSA Personal Vehicle Use Policy.

\_\_\_\_\_  
Driver Signature

\_\_\_\_\_  
Date

**NOTE:** If you drive your personal automobile while on VCSBSA business and you are involved in an accident, by law your liability insurance policy is used first. The VCSBSA liability policy would be used only after your policy limits have been exceeded. The VCSBSA does not cover, nor is it responsible for, comprehensive and collision coverage to your vehicle.

**APPROVAL**

I have read the above and approve the use of this vehicle for the purpose stated.

\_\_\_\_\_  
Administrator

\_\_\_\_\_  
Date

**MATES Parent Driver/Chaperone Field Trip Agreement**

I understand that I will drive directly to and from the scheduled field trip making no other unauthorized stops. I also understand that if I have a DVD/VHS player in my vehicle, I will only show movies/television shows that are rated G. In addition, I understand that I may not carry non-personnel, non-students, siblings or other guests as passengers.

**NO SIBLINGS ALLOWED!**

As a driver and or a chaperone, I understand that students are in my care and I agree to abstain from all influences and or distractions including eating while driving and using any hand held devices. I understand that if I violate these agreements I am out of compliance with MATES policies on driving/chaperoning and may be held liable if anything should happen. I also understand that violating these policies may result in me being required to leave the field trip at my own expense and I will not be allowed to participate in any future MATES field trips.

I, \_\_\_\_\_, understand the aforementioned and will comply with the Ventura County Office of Education Personal Vehicle Use Form and the MATES Field Trip policy and Agreement.

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_