

## VOLUNTEER DRIVER APPLICATION FORM

(this form is to be completed at the beginning of school each year, prior to the commencement of field studies)

<b>Form Effective Date:</b>	September 2, 2025	<b>Form Expiry Date:</b>	June 25, 2026
<b>School:</b>	A.J. McLellan Elementary		
<b>Volunteer Driver Name:</b>			
<b>Address:</b>			
<b>Contact No.:</b>	Mobile Phone:		Home:
<b>Driver is:</b>	Parent <input type="checkbox"/>	Staff <input type="checkbox"/>	Student <input type="checkbox"/> Other:
<b>Vehicle Owner:</b>	Driver <input type="checkbox"/>	Other:	
<b>Vehicle Owner Address:</b>	As A <input type="checkbox"/>	Other:	
<b>Vehicle Make/ Model/ Year:</b>			
<b>Max. No. of Passengers:</b>	_____ (excluding driver)		
<b>Staff Verification Section</b>		<b>OFFICE USE ONLY</b>	
BC Drivers Licence No.		<input type="checkbox"/>	<div style="border: 1px solid black; width: 80px; height: 80px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> Initial </div>
BC Vehicle Licence Plate No.		<input type="checkbox"/>	
Insurance Documents Reviewed	Min. of \$1M Third Party Liability Verified	<input type="checkbox"/>	
<b>Principal Verification Section</b>		<b>ADMINISTRATOR (PVP) USE ONLY</b>	
Criminal Record Check Obtained	Yes <input type="checkbox"/>	<div style="border: 1px solid black; width: 80px; height: 80px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> Initial </div>	
Driving Record (Driver's Abstract) Reviewed	Yes <input type="checkbox"/>		

### DRIVER'S STATEMENT:

As a volunteer driver for Surrey Schools (the "School District"), I agree to:

- ✓ Provide a safe, roadworthy vehicle licensed and registered in British Columbia;
- ✓ Possess a valid British Columbia driver's license of the appropriate class for the vehicle being driven
- ✓ Follow instructions by the Educator-in-Charge of the field study;
- ✓ Operate the vehicle in a safe manner and in compliance with all applicable laws and regulations;
- ✓ Maintain a zero blood alcohol content and abstain from using intoxicants including cannabis or any impairing medication or substance (legal or otherwise) while transporting students;
- ✓ Provide a non-smoking, non-vaping environment while transporting students;
- ✓ Refrain from using a cellular device while transporting students
- ✓ Complete any orientation on volunteer driver responsibilities as directed by the School District
- ✓ Follow the procedures for reporting incidents and accidents promptly to the School District
- ✓ Ensure that students aged 12 or under do not occupy front seats equipped with active airbags

**Insurance:**

In the unfortunate event of a vehicle accident while on school district business, insurance claims are satisfied pursuant to the terms of the insurance coverage carried on the vehicle involved. The School District does not provide physical damage insurance or primary liability coverage for volunteer or employee vehicles used for board-related business. Additionally, in accordance with Board Policy 5809 - *Personal Property Brought to School District Premises*, the School District does not accept responsibility for loss, damage or theft of personal property belonging to students, employees, and volunteers. Personal property left in vehicles is at the owners' risk.

**Privacy Note:**

Your personal information will be collected in this form for the purpose of assessing eligibility and approving participation as a volunteer community coach. If you have any questions about the collection of this personal information, please contact: [privacy@surreyschools.ca](mailto:privacy@surreyschools.ca). This information is being collected by the School District under s.26(c) of the Freedom of Information and Protection of Privacy Act

**SHOULD YOU BECOME UNABLE TO COMPLY WITH THE REQUIREMENTS SET OUT IN THIS FORM DURING ITS EFFECTIVE PERIOD, PLEASE PROMPTLY ADVISE DISTRICT STAFF AND DISCONTINUE VOLUNTEER DRIVING**

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**Driver's Signature**

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**Date**

PRINCIPAL OR VICE PRINCIPAL APPROVAL:

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**Signature / Position**

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**Date**

Please list the name(s) of your children that attend AJ:

Student Name: \_\_\_\_\_ Div: \_\_\_\_\_

Student Name: \_\_\_\_\_ Div: \_\_\_\_\_

Student Name: \_\_\_\_\_ Div: \_\_\_\_\_

Student Name: \_\_\_\_\_ Div: \_\_\_\_\_