

**EXTENDED FIELD TRIP  
VOLUNTEER DRIVER CHECKLIST**

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

Date of Trip: \_\_\_\_\_

Trip Destination: \_\_\_\_\_

Purpose of Trip: \_\_\_\_\_

**Driver/Vehicle Information**

Name of Driver: \_\_\_\_\_

Vehicle Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ License #: \_\_\_\_\_

Max. # of students to be transported in volunteer's vehicle: \_\_\_\_\_

Please respond to each item with a "YES" or "NO".

YES/NO	
	I am at least 21 years of age.
	I have a valid Idaho driver's license. License #: _____ Expiration Date: _____
	I have had no vehicle moving violations or at-fault accidents within the last three years. If you have had any, please list:
	I carry minimum auto liability limits of \$25,000/\$50,000 Bodily Injury and \$15,000 Property Damage. Company: _____ Policy #: _____ Exp. Date: _____
	I am aware that, in the event of an accident while on a school-related activity, any claims will be tendered to my personal automobile insurance company, and my insurance is primary.
	There is a working seat belt for the driver and each passenger, and I enforce the wearing of seat belts by all.

	My vehicle’s brakes, including the emergency brake, are in good working order.
	My vehicle’s tires have a tread depth of at least 3/32”.
	My vehicle’s brake lights, turn indicators, and headlights are in good working order.
	My vehicle’s windows are clear and provide an unobstructed view for the driver.
	My vehicle has functioning rear view mirrors (center and left side).
	My vehicle has no other physical defects that would interfere with the safety of the driver and passengers.
	My vehicle has a rated capacity of ten passengers or less.
	If my vehicle has dual airbags, I will not seat children under 12 years old or small persons in the front passenger seat.

The above information is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Volunteer Driver

\_\_\_\_\_  
Date

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**ADMINISTRATIVE REVIEW  
(FOR OFFICE USE ONLY)**

<b>YES/NO</b>	
	The district has cross-checked the volunteer against the statewide sex offender registry.
	If the volunteer will have unsupervised student contact, the district has obtained a current criminal history check.
	All students have parental permission to ride with a volunteer driver.
	All “NO” responses have been addressed satisfactorily.

I have reviewed the above information and this driver and vehicle are approved for this trip.

\_\_\_\_\_  
Signature of Administrator/Designee

\_\_\_\_\_  
Date