



École Braemar School
3600 Mahon Avenue
North Vancouver, BC V7N 3T6
Phone: 604-903-3270 Fax: 604-903-3271

Volunteer Driver and Vehicle Information

February, 2020

Dear Volunteer Drivers:

Thank you for volunteering to drive for a school activity. Please complete the documents in this package and return the entire package to the school. We will keep these confidential records as long as they are valid. The Abstract is valid for 3 years from the date of issue, your driver's license and vehicle insurance will be kept until they expire, but the Driver Application and Volunteer Forms must be completed each school year. During the school year, you will need to provide us with updated records if your license or insurance expires.

1. **Volunteer Forms** (Volunteer Application form and Volunteer Code form)
If you have already completed these forms during the current school year, for another activity, they are not required again.
2. **Volunteer Driver Application Form** (This is a two page form)
3. **BC Driver's Abstract** (Driving Record) from ICBC (604-661-2255)
Follow the directions as indicated on the Volunteer Driver Application form.
Please feel free to ask ICBC to fax your Driving Record to Braemar Elementary if you do not have a fax at home. Our fax number is 604-903-3271.
4. A copy of your current **Driver's License** - both sides (only required if the license expired before a new abstract is required)
5. A copy of your signed **Vehicle Insurance** - ICBC and/or private insurance (Both the description page and coverage page)

Thank you for volunteering.

Volunteer Application Form

HUMAN RESOURCES

Ph: 604-903-3451

Fax: 604-903-4605

hr@sd44.ca

In order to help secure the safest possible environment for students, it is the policy of North Vancouver School Board that all volunteers complete a copy of the Volunteer's Application

School: _____

Volunteer for (Staff Name): _____

Name: _____
Last Name
First Name
Initial

Address (Street, City, Postal Code):

Birth Date: _____

Telephone: _____ Email: _____

Do you have children in the school? Yes No

If yes above, please provide the name(s) of children in the school:

1. Have you ever been convicted of a criminal offence? Yes No
2. Are there currently any outstanding criminal charges against you? (Note: A criminal charge or conviction will not automatically exclude you from volunteer opportunities. The nature of the volunteer activities and the circumstance related to the charge or conviction will be considered.) Yes No
3. Do you know of any reason why you should not participate as a volunteer where you will be in contact with children? Yes No
4. Do you have any communicable or infectious disease? (Note: A communicable or infectious disease will not automatically exclude you from volunteer opportunities. The nature of the volunteer activities and the nature of the communicable or infectious disease will be considered.) Yes No

If any of the above questions 1, 2, 3 or 4 are answered YES, please provide details in the space provided below. Confidentiality will be respected. Include at least one authority (name, position, and telephone number) with whom we may discuss matters and confirm details.

Provide the names and telephone numbers of two references, who are not related to you in any way.

1. Name: _____ Phone Number: _____
2. Name: _____ Phone Number: _____

I have read and understand all of the following policies:

Policy 404: Volunteers In Schools -

[https://www.sd44.ca/Board/PoliciesProcedures/Series400/Policy404/Pages/default.aspx#/=](https://www.sd44.ca/Board/PoliciesProcedures/Series400/Policy404/Pages/default.aspx#/)

Policy 607: Transportation of Students -

[https://www.sd44.ca/Board/PoliciesProcedures/Series600/Policy607/Pages/default.aspx#/=](https://www.sd44.ca/Board/PoliciesProcedures/Series600/Policy607/Pages/default.aspx#/)

Policy 611: Privacy -

[https://www.sd44.ca/Board/PoliciesProcedures/Series600/Policy611/Pages/default.aspx#/=](https://www.sd44.ca/Board/PoliciesProcedures/Series600/Policy611/Pages/default.aspx#/)

I certify that the information given in this form is true and correct and agree that falsification or omission of information called for may result in my removal as a volunteer. To ensure the safety and well-being of children, permission is hereby granted to conduct any investigation including a criminal record search, that may be deemed desirable regarding the information contained in this form.

Signature: _____

Date: _____

Braemar Elementary Volunteer Code

- I agree to abide by all instructions and direction given to me by the supervising teacher while volunteering.
- I have read the Braemar Elementary Code of Conduct and will follow its guidelines respectfully and responsibly while volunteering.
- I have spoken with my supervising teacher about student behavior and expectations and understand my role in responding to students.
- I have reviewed with the supervising teacher the emergency and fire drill procedures in place at the school.
- I am aware of the confidential nature of teacher records, student records, student individual programs, and student progress and agree to refrain from discussing or making comments of a personal nature regarding students, staff, and individual programs or individual student progress.
- If I am a volunteer driver, I understand that I must complete the volunteer driver's check in the school office prior to driving students.
- I understand that North Vancouver School District Policy 404: Volunteers in Schools may result in the principal requiring additional information from me prior to certain specific types of volunteer activity.

Signature: _____

Printed Name: _____

Date: _____

Home Telephone: _____

The active involvement of parents in a volunteer role has the potential to provide considerable benefit to the intellectual and social development of students. In addition, the participation of volunteers increases communication and positive relationship between the school, parents, and the community. Consequently, the Board supports and encourages the use of volunteers to support the work of employees. (Excerpt from NVSD Policy 404: Volunteers in Schools.)

Thank you for your valuable and welcome support as a

Braemar Elementary School volunteer!

Volunteer Driver Application Form

School: _____ School Fax: _____

Driver's Name: _____

Volunteer for (Staff Name): _____

Name of Children in the School: _____

Address (Street, City): _____ Postal Code: _____

Telephone: _____ Email: _____

Vehicles to be used:

	Vehicle 1	Vehicle 2
Year/make/style		
Colour		
License plate		
Passenger capacity		
Owner's name		
Drivers license number		
Number of operating seat belts		
Number of places for booster seats (if applicable see Declaration #2)		
Insurance registration number / expiry date of insurance		

Declarations

In volunteering to transport students, I declare the following:

1. My vehicles used for student transportation are rated appropriately and insured with minimum Third Party Liability insurance of \$1,000,000.
2. My vehicle is properly equipped with seat belts for each occupant; seat belts will be secured when travelling. Booster seats must be used for children up to their 9th birthday or 145cm (4'9") tall, whichever comes first.
3. I understand that the School District will not accept responsibility for any damage to my vehicle in the event of an accident, nor for deductible, loss of insurance discount or loss of use.
4. I will ensure that, to the best of my knowledge, the motor vehicle used for student transportation, is in good mechanical condition.
5. I am at least 21 years of age and in good health and not a secondary school student. Upon request I will provide a copy of my current driver's license to the school principal/vice-principal.
6. My vehicle will be equipped with winter, all season tires and/or chains for winter conditions.
7. For safety and health reasons, I will not allow smoking in my vehicle while transporting students.
8. I will not, at any time during my performance as a volunteer driver, imbibe any alcoholic beverages or use any restricted substances.
9. I will operate the vehicle in a safe manner and not in contravention of any statute or regulation governing the operation of motor vehicles.

Volunteer Driver Application Form

10. My Drivers Record dated _____ is attached. I understand that if violations are recorded a school administrator will determine my suitability as a driver. A new driver's record must be provided every three years.
11. I agree to wear a seat belt and require all passengers to wear a seat belt.
12. I agree that I will not permit a child under 13 years of age to occupy the front passenger seat of a vehicle equipped with a passenger seat air bag.
13. I will not use my hand-held electronic devices, such as cellphones, Blackberrys, MP3 players and ipods, while driving students. Under Bill 15, the *Motor Vehicle Amendment Act, 2009* this is illegal. For further details see the *Motor Vehicle Amendment Act*.
14. I understand that my physical and medical condition is critical to my ability to safely operate a vehicle. I have no physical or medical conditions that restrict my ability to drive, nor am I taking any medications that would impair my ability to drive.

Note:

- A. If a vehicle has the capacity to carry more than 9 occupants the driver must have a Class 4 Driver's license.
- B. The School District provides Excess Third Party Liability coverage for volunteer drivers and owners while lawfully operating vehicles on behalf of the School District.
- C. Your B.C. driving record lists your licensing transactions and offences over the last 5-year period.

Getting your own record

You can get a free copy of your B.C. driving record from a driver licensing office. Here's the process:

1. Apply online by going to <https://onlinebusiness.icbc.com/clio/> and a copy of your driving record will be emailed to you directly.
2. Go to any driver licensing office. Bring:
 - your B.C. driver's license, or
 - one piece of primary identification and a second piece of either primary or secondary ID.
3. Receive a copy of your driving record from licensing staff.
4. You can also call 604-661-2255 and it will be emailed to you.

I have read and understand all of the following policies:

Policy 404: Volunteers In Schools -

[https://www.sd44.ca/Board/PoliciesProcedures/Series400/Policy404/Pages/default.aspx#/="](https://www.sd44.ca/Board/PoliciesProcedures/Series400/Policy404/Pages/default.aspx#/=)

Policy 607: Transportation of Students -

[https://www.sd44.ca/Board/PoliciesProcedures/Series600/Policy607/Pages/default.aspx#/="](https://www.sd44.ca/Board/PoliciesProcedures/Series600/Policy607/Pages/default.aspx#/=)

Policy 611: Privacy -

[https://www.sd44.ca/Board/PoliciesProcedures/Series600/Policy611/Pages/default.aspx#/="](https://www.sd44.ca/Board/PoliciesProcedures/Series600/Policy611/Pages/default.aspx#/=)

Volunteer Driver's and Vehicle Owner's Declarations

(I/We) have read the declarations above items 1 through 13, including notes, regarding transportation of students for sanctioned school activities and declare each of the above to be true.

Driver Signature:

Date:

Vehicle Owner Name (please print):

School Principal Name:

Vehicle Owner Signature:

School Principal Signature: