Olympia School District
Transportation Center
Volunteer Driver Checklist
District Vehicle

TRIP INFORMATION
Date: ________________      School: _________________________
Destination: ____________________________      Trip Date: ____________________________

Maximum number of passengers to be transported in volunteer's vehicle:
______________________________________________

Driver Screening/Insurance Requirements:

Driver's Name: ________________________________      DOB: ____________________________

☐ I am 21 years of age or older.

☐ I have a valid Washington Stats driver's license.

License #: ________________________________      Exp. 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 hereby verify that the above-required information is true and accurate to the best of my knowledge.

Signature of Volunteer Driver: ________________________________
Volunteer Driver Checklist
Private Vehicle

Vehicle Inspection

☐ I verify there is a working seatbelt for the driver and each passenger, and I will enforce the wearing of seatbelts at all times.

☐ I verify the brakes, including emergency brake, are in good working order.

☐ I verify the tires have legal tread depth, and are in good condition. (No cuts, bulges, exposed cord, exposed steel)

☐ I verify the brake lights, turn indicators, hazard lights, and headlights work properly.

☐ I verify the windows are clear and provide unobstructed view for the driver.

☐ I verify the rear view minors function properly (center and left side).

☐ I verify the vehicle has a capacity rating of 10 or less.

☐ If the vehicle has dual airbags, I agree 1 will not allow children less than 12 years of age or small persons in the front passenger seat...

☐ I hereby verify the above information is true and accurate to the best of my knowledge.

Driver Signature: ____________________________ Date: ____________________________

Administrative Review

It is recommended:

☐ If the volunteer will drive for more than one day, the school obtain a motor vehicle abstract (five-year record with departmental action).

☐ If the volunteer will drive for more than one day and will have unsupervised student contact, the school obtain a Washington State Patrol background 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.

__________________________________________ ________________________
Administrator/Desigee Date