

School Year: _____

Desert Sands Unified School District
Automobile Insurance Verification & Authorization to Obtain DMV Report
(Request in accordance with DSUSD BP & AR 3541.1)

This request must be filed with Risk Management 14 days prior to driving in order to receive DMV Report.
Clearance is required *prior to driving*. Print clearly and list only one driver per form.

Parent Volunteer District Employee Walk-On Coach Other _____

Driver's Name: _____ Driver's Birthdate: _____
(Name as it appears on California Driver's License)

Driver's License #: _____ Driver's Phone #: _____
(Must be a Current California Driver's License)

Address: _____ City: _____ State & Zip Code: _____

Email Address: _____ School Site: _____

Child's Name: _____ Child's Grade/Room #: _____

Year/Make/Model of Automobile: _____ Insurance Carrier: _____

Policy #: _____ Policy Expiration Date: _____

I certify that I have not been convicted of reckless driving or driving under the influence of drugs or alcohol within the past five years and that the information given above is true and correct. I am aware that driving violations may prohibit my ability to drive students and/or a district vehicle. I understand I must have liability insurance coverage in the amount of not less than the State's minimum requirement (it is recommended your limits are at least \$100,000) in force and agree to advise the district, in writing, of any changes in the above information. I understand that, if an accident occurs, my insurance coverage shall bear primary responsibility for any losses or claims for damages. I authorize Desert Sands Unified School District to obtain a copy of my driver record information report.

Desert Sands Unified School District is a self-funded, self-insured public entity. Any employee reimbursement for auto expense includes all maintenance, fuel, oil and all other related costs, including the cost for insurance. If you drive your personal automobile while on school business and are involved in an accident, by law your personal insurance policy is primary. The district liability policy is used only after your liability policy limits have been exhausted. The district does not cover, nor is it liable for, comprehensive and collision coverage to your vehicle.

Driver's Signature: _____ Date: _____

Requested By: _____ Date: _____
Signature of Principal / DEC Director

When driving on school district business, remember:

1. Follow the most direct route
2. Avoid unnecessary stops.
3. Obey all traffic laws.
4. Seat belts must be worn by everyone in the vehicle.
5. Do not put children in front seats for safety reasons and possible injuries from air bag deployment.
6. Transport only authorized personnel, approved volunteers and district students directly involved in the activity.
Do not transport siblings, other children or unauthorized adults.
7. Personal vehicles allowing for more than nine (9) passengers, ten (10) total including driver shall not be used.