

Student Name:

ID#

PRIVATE DRIVER APPLICATION (Volunteers Driving Personal Vehicle)

For School Year 2026 / 2027

A. PERSONAL USE DRIVER INSTRUCTIONS

Drivers and private vehicles being operated for Red Bluff Joint Union High School District purposes must meet or exceed the following guidelines:

1. All drivers must be approved by the school or site administrator.
2. The driver must be at least age 21 to drive for business purposes and age 25 if transporting students possessing a valid California driver's license, and have been continuously licensed for a minimum of 3 years.
3. Driver must be free of any medical condition that may affect his/her ability to operate a vehicle.
4. No alcohol or drugs will be consumed prior to, or while operating the vehicle.
5. The vehicle will be in excellent condition and repair.
6. The number of passengers shall not exceed the capacity for which the vehicle was designed
7. No one may transport more than nine passengers plus the driver in any vehicle.
8. All occupants must wear seat belts whenever the vehicle is in motion.
9. All students who are less than 8 years of age or under 4'9" tall must be properly secured in a rear seat, in a child passenger restraint system, meeting applicable federal motor vehicle safety standards.
10. The use of cell phones or other electronic devices while driving is prohibited.
11. Smoking a pipe, cigar or cigarette/electronic cigarette in the vehicle is prohibited.
12. The driver accepts the added responsibility that comes from carrying extra individuals and, therefore, will be conscientious in obeying all driving rules and regulations in accordance with federal, state and local laws. The California Supreme Court has eliminated the protection of the former California Guest Law; therefore, a guest passenger may sue his/her host owner/driver.
13. The driver must provide a MVR (Motor Vehicle Report / Driver Record) dated within 30 days of this application and have an acceptable driving record as determined by the RBJUHS District policy. The RBJUHS District reserves the right to require a current K-4 Driver Records and/or accident reports for determination of driver eligibility.
14. Driver must have an automobile liability insurance policy and assume all responsibility for all physical damage to the vehicle. When driving a personal vehicle while on RBJUHS District business and involved in an accident, by law your liability insurance policy is used first. The RBJUHS District liability policy would be used only after your policy limits have been exceeded. **Minimum liability limits of insurance required are:**
Bodily Injury \$100,000 each person; \$300,000 each occurrence
Property Damage \$ 50,000 each occurrence or
Combined Single Limit \$300,000 each occurrence
15. If the above conditions change and/or cannot be met, I will no longer participate as a driver until the requirements can be met.

B. DRIVER INFORMATION

Driver Name _____	Date of Birth _____
Address _____	License # _____
_____	Expiration Date _____
Home Phone _____	Cell Phone _____

C. VEHICLE INFORMATION

Make & Model _____ Vehicle Year _____
Registered Owner Name _____ License Plate No. _____
Number of Seatbelts _____ Registration Expiration Date _____

D. INSURANCE FOR VEHICLE LISTED ABOVE

Insurance Company _____ Policy No.: _____
Expiration Date of Policy _____
Bodily Injury Limit \$ _____ each person and \$ _____ each occurrence
Property Damage Limit \$ _____ each occurrence

~OR~

Bodily Injury and Property Damage Liability, Combined Single Limit \$ _____ each occurrence

E. DRIVING RECORD

1. Have you had a valid California Driver's License during the past 3 years? ___ Yes ___ No
2. Age when first licensed? _____
3. Based on the Driving Record Table below, does your driving record meet the criteria of an "**Acceptable Driver**"? ___ Yes ___ No

Minor Violations (within past 3 Years) include any moving violation that is not a major/serious violation as shown in this Table. *(Examples of minor violations include, but are not limited to speeding, failure to yield, illegal passing, stop sign/light violation, improper turn, following too close, any other moving violation where DMV points are assessed).*

Number of Minor Violations Within Last 3 Years	Number of At-Fault Accidents Within Last 3 Years			
	0	1	2	3 or more
0	Acceptable	Acceptable	Borderline	Unacceptable
1	Acceptable	Acceptable	Borderline	Unacceptable
2	Acceptable	Borderline	Unacceptable	Unacceptable
3 or more	Unacceptable	Unacceptable	Unacceptable	Unacceptable

License Suspension or Revocation (within past 3 Years)

Unacceptable

Major/Serious Violations (within past 5 Years)

- Failure to stop in the event of an accident (Hit and Run)
- Driving under the influence of alcohol or drugs or with open container
- Refusing to take a substance/chemical test
- More than one dismissal of a conviction relating to controlled substances □ Reckless/Careless Driving
- Homicide or Manslaughter or using vehicle in connection with a felony
- Evading a Peace Officer or resisting arrest
- Driving the wrong way or in the incorrect lane on a divided highway
- Driving in excess of 100 mph
- Racing/Speed contests
- Passing a stopped school bus

Unacceptable

F. ATTACH

1. Copy of Driver's License
2. Copy of Current Auto Insurance Policy (Declaration Page)
3. MVR (Motor Vehicle Record / Driver Record) dated within past 30 days.
<https://www.dmv.ca.gov/portal/dmv/detail/online/dr>

G. DRIVER ACKNOWLEDGEMENT

I certify the above information is correct and agree to advise the RBJUHS District, in writing, of any changes in the above information. I have read and understand the Personal Use Driver Instructions.

Print Driver Name _____ Driver Signature _____
Date _____

H. ACKNOWLEDGEMENT BY REGISTERED OWNER:

As the registered owner, I certify the above insurance information is correct. I understand I must have liability insurance coverage in force and agree to advise the RBJUHS District, in writing, of any changes in the above information. I further certify that to the best of my knowledge, the above vehicle is mechanically safe. If an accident occurs, my auto liability policy is primary and used first for losses or claims for damage. The RBJUHS District does not cover, nor is it responsible for, comprehensive and collision (physical damage) coverage to my vehicle.

Print Registered Owner Name _____
Owner's or Authorized Representative Signature _____ Date _____
Authorized Driver's Name (if different from registered owner) _____

For District Use Only:

Approved Driver and Vehicle: _____ Date: _____ (Designated District Official)

RED BLUFF JOINT UNION HIGH SCHOOL DISTRICT
1525 Douglass St./P.O. Box 1507
Red Bluff, CA 96080
(530) 529-8700
2026/2027

VOLUNTEER INFORMATION :

Name
Last First Middle
Address Number & Street City State
Home Telephone Work Telephone
Cell phone Email

Student's Name

Name of person under whom you are volunteering

Email OR phone number of above named individual

Have you ever been convicted of anything over than a minor traffic violation ?

Yes No

If yes, please explain

CERTIFICATION OF VOLUNTEER: Read carefully before signing. I
hereby certify that all answers to the above questions are true.

Date Volunteer Signature

Date Administrator Signature

For coaches: Fundamentals of Coaching - <http://nfhslearn.com/?courseID=1000>
Courses Heat Illness and Concussion - <http://nfhslearn.com/?courseID=1000>
Sudden Cardiac Arrest (SCA) - <http://nfhslearn.com/?courseID=1000>
CPR/First Aid, TB Test, Livescan (HR will provide the order; cost to volunteer \$64.00) **Applicant must meet with the school Administrator to get signature.**

For Parent Drivers: Please submit this form along with the Parent Driver Application

For Chaperones: Any parent/volunteer responsible for the supervision of an assigned group of students must be Live Scanned (HR will provide the order; cost to volunteer \$64.00).

For Parent/Guardian attending a field trip (without chaperoning): Turn in this form along with a copy of your Driver's License.