



Transportation Agreement – Parent and Student PALLISER BEYOND BORDERS



Palliser Regional Schools permits the use of properly licensed volunteer drivers, as approved by the principal, to convey students to and from approved activities.

Students driving themselves from their regular school to a Palliser Beyond Borders campus or Off-Campus Education site for course work are viewed as volunteer drivers. This does **not** give permission to drive to school division/sports events.

Palliser requires that parental consent be obtained for a student to be a passenger in a vehicle driven by a volunteer driver for school approved activities, or to drive him/herself for school approved activities. Please note that student volunteer drivers are **not** approved to drive students in their vehicles as a passenger.

A District employee is considered to be a volunteer driver if using his/her vehicle to transport students (other than employees contracted to transport students). All volunteers must complete a "Volunteer Driver Authorization" form.

Parental approval may be give once to cover the full academic year.

Part 1: To be completed for ALL students:

I, (parent) _____, agree that my son/daughter, _____, **may**, for this academic year, **travel in a private vehicle** for off-campus learning in Work Experience, RAP, Green Certificate, Ironworker program, career internship, volunteerism, dual credit courses, and for travel between Palliser schools, with _____ (authorized adult volunteer driver).

Signature of Parent/Guardian

Date

Part 2: To be completed for licensed Student Volunteer Drivers only:

I, (parent) _____, agree that my son/daughter, _____, **may**, for this academic year, **drive my/our vehicle** for off-campus learning in Work Experience, RAP, Green Certificate, career internship, volunteerism, dual credit courses, and for travel between Palliser schools.

Signature of Parent/Guardian

Date

Part 3: To be completed by Student Volunteer Drivers only:

I, (student) _____, agree I will not drive a vehicle for off-campus learning in Work Experience, RAP, Green Certificate, career internship, volunteerism, dual credit courses, or for travel between Palliser schools, with another student as a passenger.

Signature of Student

Date

Expiration Date: End of Current Academic Year (September – August)

A New Learning Landscape

Updated March, 2018

Palliser Beyond Borders c/o County Central High School, Box 390 Vulcan, Alberta T0L 2B0 | Phone 403-485-6180

@PalliserBB facebook.com/palliserbeyondborders

palliserbeyondborders.com



VOLUNTEER DRIVER AUTHORIZATION PALLISER BEYOND BORDERS



Volunteer drivers transporting students from their regular school to a Palliser Beyond Borders campus or to an Off-Campus Education site for course work must be authorized. Students driving themselves are considered volunteer drivers and must also complete this form.

Volunteer drivers must inform their insurance company of their intention to use their automobile to act as a volunteer driver for Palliser Regional Division No. 26 school activities. Palliser Regional Schools does not provide liability insurance protection for individual drivers.

- ☐ A minimum of \$2,000,000 public liability and property damage coverage must be in force on the automobile insurance before a volunteer driver may use his/her vehicle to transport students. **Please attach a copy of your insurance policy showing proof of this coverage.**

- ☐ All drivers must have a Driver Abstract on file with Palliser Regional Schools. **Please complete the Driver Abstract Consent form attached.**

Note: Any student driving themselves must complete the **Transportation Agreement - Parent and Student**. If a student is driving him/herself, he/she may **not** transport students as passengers.

VOLUNTEER DRIVER'S NAME: _____ a parent driver a student driver

ADDRESS: _____ POSTAL CODE: _____

PHONE NO.: _____ DATE OF BIRTH: _____

DRIVER'S LICENSE NO.: _____ CLASS: _____ EXPIRY DATE: _____ NAME OF

INSURANCE COMPANY: _____

INSURANCE POLICY NO.: _____ EXPIRY DATE: _____

INSURANCE AGENT: _____

VEHICLE(S) DESCRIPTION: MAKE: _____ MODEL: _____ LIC Plate# _____

MAKE: _____ MODEL: _____ LIC Plate# _____

The vehicle(s) listed is adequately insured and I am properly licensed to drive it.

I have attached a copy of my insurance policy showing the required level of insurance.

If the volunteer driver is a student, he/she may not drive with another student as a passenger.

Signature of Volunteer Driver

Date

Student's School

APPROVAL BY SCHOOL PRINCIPAL:

Signature of Principal

Date

Expiration Date: End of Current Academic Year (September – August)

Updated January, 2018

In accordance with s. 33(c) of the *Freedom of Information and Protection of Privacy Act*, the *Traffic Safety Act*, and the *Access to Motor Vehicle Information Regulation*, specific personal information is collected to confirm the identity of the consenting individual, to uniquely identify the consenting individual on the Registrar's system to produce the information product, and to confirm the identity of the recipient and of the authorized employee of the recipient (if the recipient is an organization). The information is collected to monitor and audit the release of information and to conduct investigations if the Registrar receives complaints about the release. Questions about the collection of this information can be directed to a Service Alberta Information Officer at 780-427-7013, toll free 310-0000 within Alberta. Alternatively, questions may be mailed to Box 3140, Edmonton, AB T5J 2G7, attention Data Access and Contract Management Unit (DACMU).

A "Driver Abstract" is the product name under which the Alberta Government releases specific information from a person's driving record, which contains:

- Name
- Address
- Date of Birth
- List of violations (Descriptions, Demerit / Merit Points and Suspension Term)
- A Commercial Driver Abstract (CDA) includes Commercial Vehicle Safety Alliance Inspection (CVSA) information and all of the above information with the exception of date of birth, height, weight, and sex.
- Height
- Weight
- Sex
- Class
- Issue Date
- MVID Number
- Licence Number
- Current Demerit Points
- Suspended Status
- Expiration Date
- Reinstatement conditions (if any)

PART 1

I, _____ of _____,
Full Name Full Address

declare that my Driver's Licence Number is: _____, my Date of Birth is: _____,
month by name, day, year

and I give consent for my: ☒ 3 Year, ☐ 5 Year, ☐ 10 Year Driver Abstract (SDA),
☐ 3 Year, ☐ 5 Year, ☐ 10 Year Commercial Driver Abstract (CDA),

to be released, for the period specified under the subsection 5(1)(a), 5(1)(b)(iii) or 5(1)(b)(v) of AMVIR listed below,

to _____ of _____,
Name of the person / organization receiving the driver's abstract Full Address

In accordance with the *Alberta Motor Vehicle Information Regulation* (AMVIR) (choose one of the following subsections):

☐ 5(1)(a) driver's abstract released to a person known by myself

I acknowledge that the above individual is personally known to me, is not acting as an agent or employee of any other person in this transaction, and is not compensated in any manner for receiving or transferring the driver's abstract to myself.

NOTE: This consent is valid for one month after the consent is dated and the information product released cannot be faxed by the registry agent.

☐ 5(1)(b)(iii) driver's abstract released to my employer or prospective employer

NOTE: This consent is valid for three months after the consent is dated if it is used by a prospective employer. This consent is valid for three years from the date it is dated or for the length of the employment whichever is shorter if it is used by the current employer. The information product released can be faxed by the registry agent only to the Employer signing PART 2.

☐ 5(1)(b)(v) driver's abstract released to a lawyer representing me

NOTE: This consent is valid for three months after the consent is dated. The information product released can be faxed by the registry agent only to the Lawyer signing PART 2.

I agree that Alberta Registries and/or the registry agent are not liable for any damages or losses however caused, in respect to any defect, error or omission in the driver's abstract, or use of the driver's abstract by the person receiving it.

Date Signature

PART 2 - Declaration for Faxing (This does not apply to subsection 5(1)(a) above)

I / We, _____ of _____,
Name of Employer or Lawyer Address

request the driver's abstract, as mentioned above, to be faxed to _____
Fax Number (include area code)

I/We agree that Alberta Registries and/or the registry agent are not liable for any privacy breach after the driver's abstract has been faxed to the above number.

Date Signature of Employer or Lawyer