

**ALTERNATIVE VEHICLE DRIVER
INFORMATION REQUEST FORM**

Please Print

Applicant – First Name	Middle Initial	Last Name	Home/Cell Phone #	Birth Date
Driver License Number - For Verification Purposes			E-mail address	
Address		City	State	Zip

YES NO

Have you ever been convicted of a crime or other offense listed under s.343.12(7) Wis. Stats., or Ch. Trans. 12.15 WI Admin. Code within the time frame listed on the attached list of crimes?

Are you currently listed on any sex offender registry?

Are you currently listed on any nurse abuse registry?

Explain "YES" answers

YES NO

Have you been a resident in another state within the previous 2 years?

If "YES" list all other state(s) in which you have been a resident during the previous 2 years:

Position in District:

_____ **Employee** _____ **Board Approved Volunteer** _____ **Parent** _____ **Coach**

Minimum Age: 18 years; 25 if driving a rental vehicle

Driver meets the minimum age requirement? _____ Yes _____ No

Applicant Statements

As an alternative vehicle driver, I agree to report in writing to my employer, within 10 days:

1. Any accident in which I was involved as the operator of any motor vehicle regardless of who was at fault or if citations were issued;
2. Any conviction or operating privilege withdrawal listed under s.343.12(7) Wis. Stats., or Ch. Trans. 112.15 WI Admin. Code that makes the operator ineligible to operate a motor vehicle to transport pupils;
3. If I hold a school bus endorsement, any incidents that would disqualify me for holding that endorsement; Any suspension or revocation of my operating privilege;
4. Any cancellation of my school bus endorsement of this state or another jurisdiction
5. Any cancellation of my school bus endorsement of this state or another jurisdiction.

* I understand that I may not falsify or provide incomplete information in respect to any material fact on this or any other background information form.

* I also understand that it is my responsibility to report any new medical condition or a medical condition that has significantly changed since my last report.

* I have had a medical exam in the last three years and do not currently have any mental or physical disability or disease such as to prevent me from exercising reasonable control over a motor vehicle.

I have read, understand, and agree to abide by the Administrative Guidelines for Driving School Authorized Vehicles

A copy of my driver's license is attached.

(Applicant Signature)

(Date)

(Administrative Signature)

(Date)

**** Please complete the back of this form if you intend to transport students in your vehicle ****

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TO BE FILLED OUT IF INTENT IS TO TRANSPORT STUDENTS IN YOUR OWN VEHICLE.

Vehicle Year: _____

Vehicle Make and Model: _____

Insurance Company: _____

Agent Name and Address: _____

**Attach a copy of your insurance coverage indicating the following liability minimums:
\$50,000 bodily injury or death of one person; \$100,000 bodily injury or death for 2 or more persons; \$15,000
property damage.**

Attach a copy of a 21 point used vehicle safety inspection report completed during the last year.

Administrative Signature

Date

School District of Rhinelander
Administrative Guidelines for Driving School Authorized Vehicle

Revised 11/1/2018

1. Alternate methods of transportation may be used as approved by Board policy.
2. Each driver must be approved by administration as allowed by Board policy.
 - a. Driver shall not transfer keys to another individual without Administrative approval in advance of transfer.
3. Driver agrees to abide by all federal, state, and local laws and regulations.
4. Driver will follow all speed limits and traffic laws. Any tickets or traffic violations are the responsibility of the driver and not the District.
5. The use of cell phones is prohibited while driving a SDR vehicle or while transporting students.
6. Driver agrees to follow Board established Policies and Administrative Rules and Guidelines, especially Board Policy #8640 and #8660.
7. Driver must not be under the influence of alcohol or illegal substances.
8. No use of tobacco, alcohol, or illegal substances allowed in the vehicle or at any time during the authorized use of vehicle or during the duration of the event.
9. Number of passengers excluding driver will not exceed eight (8), and will further be limited to the number of available seat belts in such vehicle.
10. Seat belts are required to be worn at all times by the driver and all passengers.
11. The District reserves the right to obtain driving records and deny the use of the vehicle based on that information.
12. Driver will refrain from driving if there is any potential risk to the driver or passengers or if the driver has any known impairment that could cause any potential risk to passengers or self.
13. Driver will be responsible for the safety and well being of all passengers in the vehicle.
14. District students not affiliated with the trip activity, non-district students, and/or children of preschool age shall not be permitted to ride on the trip without approval of the principal.
15. The District and/or designated administrator reserves the right to deny the privilege of driving to any individual who it feels does not have the best interest and safety of the passengers in mind.
16. School owned vehicles are authorized for the designated trip only. They must remain on school property until leaving on the trip and should be returned immediately following the trip. Taking a suburban to one's home is prohibited.
17. School owned vehicles must be returned clean and the gas tank filled. Please use the designated gas stations that are set-up with charge accounts for SDR. The gas stations are listed on a card in the vehicles. Sign the receipt (legibly) and return to the business office.
18. Personal vehicles may be authorized for school use if the proper info is submitted and has administrative approval. (See the 2nd page of the Alternative Vehicle Driver Info Request Form)
19. Keys must be dropped in the designated box NIGHTLY unless prior arrangements were made with Pupil Services. (Locked box attached to the building located on the left side as you enter Door 13)
20. Involvement in an accident or any damage to the vehicle must be reported immediately to the Business Office at (715) 365-9734.
21. Special Education Vehicle:
 - a. Purpose of usage must be in accordance with Special Education guidelines.
 - b. Staff traveling with students will be given priority over staff traveling alone.
 - c. Transportation and driver must be approved by the Special Education Director and/or designee.

TRANSPORTATION FOR FIELD AND OTHER DISTRICT-SPONSORED TRIPS

It shall be the policy of the Board to use regular or special-purpose school vehicles for transportation on field and other District-sponsored trips.

The transportation for all field and other District-sponsored trips is to be by vehicles owned or approved by the District and driven by approved drivers. The Superintendent or his/her designee will have the authority to deny anyone from driving district vehicles owned or approved by the District based upon their driving record or other records that cause safety or legal concerns. Exceptions must have the approval of the Superintendent.

All field trips shall be supervised by members of the staff. All other District-sponsored trips shall be supervised by either staff members or adults from the sponsoring organization. Any time students are on the vehicle, at least one (1) sponsor, chaperone, or staff member is expected to ride in the vehicle as well as to supervise students upon return to the District and while they are waiting for rides home.

All students are expected to ride the approved vehicle to and from each activity. A special request must be made to the staff member or sponsor by the parent, in writing or in person, to allow an exception.

District students not affiliated with the trip activity, non-district students, and/or children of preschool age shall not be permitted to ride on the trip vehicle without the approval of the principal.

No student is allowed to drive on any trip. An exception may be made by the principal on an individual basis, provided the student has written parental permission and does not transport any other student.

The district's insurance will be primary in case of any accident. However, secondary insurance must be provided by the driver of any district-owned or approved vehicle.

The Superintendent shall prepare administrative guidelines to ensure that all transportation is in compliance with Board policy on use of District vehicles and/or use of private vehicles.

121.54 (7), Wis. Stats.