



TO: COE Employees – Authorization to Drive a COE or Personal Vehicle
FROM: Rebecca Olker, Senior Director, Fiscal Services
RE: Driving Requirements

GUIDELINES FOR DRIVING A COE VEHICLE OR PERSONAL VEHICLE

In accordance with its insurance program, the Santa Cruz County Office of Education has established the following requirements for those employees seeking authorization to drive a COE or Personal vehicle while doing COE related business and/or transporting students.

All SCCOE employees who expect to drive a COE vehicle, a Personal vehicle, and/or transport students must submit the forms listed below to the Business Office for evaluation and approval by the CBO prior to driving for the COE. This applies to the “casual” transportation of students, as well as field trips.

If you are driving a private vehicle, the following is required:

A completed “Employee Vehicle Use” Form

A copy of your DMV driving record printout

A copy of your driver’s license

Proof of insurance naming the minimum dollar limits listed below:

Bodily Injury \$100,000/\$300,000

Property Damage \$50,000

Medical \$5,000

You must complete the On-Line Defensive Driver Training and submit your certificate.

****If you are involved in an accident in your personal vehicle, by law your liability insurance is primary, and the district’s liability policy would only be used after your limits have been exceeded. The district is not responsible for comp and collision coverage to your vehicle.**

If you are driving a school district or COE vehicle, the following is required:

You must be a COE employee.

A completed “Employee Vehicle Use” Form

A copy of your DMV driving record printout

A copy of your driver’s license

Proof of insurance meeting state minimum requirements

You must complete the On-Line Defensive Driver Training and submit your certificate.

EMPLOYEE AUTHORIZATION TO USE COE VEHICLE

Please forward this completed form to the Business Department, and include your proof of required insurance coverage, a DMV Driving Record Printout, a photocopy of your Driver's License and your Defensive Driving Training Certificate.

- Santa Cruz County Office of Education Transportation Regulation COE Regulation 3545.2 E.C. 39806 Title V 1505

In approving In-lieu Transportation Requests, any employee seeking authorization to drive must provide the Santa Cruz County Office of Education with proof that their insurance policy meets the state's minimum insurance requirements.

Name of Driver: _____ **Date of Birth:** _____ **Driver's**

License Number: _____ **Exp. Date:** _____

Will You Be Driving Students? ☐Y ☐N If yes, the driver must be over 18 and parents/guardians of student riders in this vehicle must give permission for them to ride in this vehicle.

Driving Restrictions: _____

I certify that the above information is correct and the insurance coverage is in force. I understand that I must have valid insurance in force and I agree to advise the Santa Cruz County Office of Education, in writing, of any changes in the above information.

Owner/Driver) Date Phone Number Signature (Vehicle

Description of event, trip, or activity Department

NOTE: If you drive your personal automobile while on COE business and you are involved in an accident, by law, your insurance policy is the primary coverage. The COE insurance policy would go into effect only if you exceed your policy limits. The COE does not cover, nor is it responsible for, comprehensive and collision coverage to your vehicle.

- BUSINESS OFFICE USE ONLY

Deputy Superintendent, Business Services Date

EMPLOYEE AUTHORIZATION TO USE PERSONAL VEHICLE

Please forward this completed form to the Business Department, and include your proof of required insurance coverage, a DMV Driving Record Printout, a photocopy of your Driver's License and your Defensive Driving Training Certificate.

- Santa Cruz County Office of Education Transportation Regulation COE Regulation 3545.2 E.C. 39806 Title V 1505

In approving In-lieu Transportation Requests, any employee seeking authorization to drive their personal vehicle must provide the Santa Cruz County Office of Education with proof that their insurance coverage meets the following minimums:

\$100,000/\$300,000 Bodily Injury

\$50,000 Property Damage

\$ 5,000 Medical

Name of Driver: _____ **Date of Birth:** _____

Driver's License Number: _____ **Exp. Date:** _____

Will You Be Driving Students? ☐Y ☐N If Yes, the driver must be over 18 and parents/guardians of student riders in this vehicle must give permission for them to ride in this vehicle.

Driving Restrictions:

I certify that the above information is correct and the insurance coverage is in force. I understand that I must have valid insurance in force and I agree to advise the Santa Cruz County Office of Education, in writing, of any changes in the above information.

Signature (Vehicle Owner/Driver) Date Phone Number

Description of event, trip, or activity Department

NOTE: If you drive your personal automobile while on COE business and you are involved in an accident, by law, your insurance policy is the primary coverage. The COE insurance policy only goes into effect if your policy's limits are exceeded. The COE does not cover, nor is it responsible for, comprehensive and collision coverage to your vehicle.

- BUSINESS OFFICE USE ONLY

Deputy Superintendent, Business Services Date