

Almost Home, Inc. Volunteer Driver Application

This authorization is for driving other volunteers or personnel, donations, goods, and other materials, hereinafter referred to as “items”, during a volunteer activity, hereinafter referred to as “shift”, under the ALMOST HOME INC. Volunteer Program. **ALMOST HOME INC.** does not insure privately owned vehicles or vehicles owned by other agencies. Terms and conditions of master insurance policies apply.

Only licensed drivers, 21 years or older, are authorized to drive items to and from sites during scheduled shifts. Proof of insurance coverage is to be submitted to **ALMOST HOME INC.** along with this Application.

Shift Type(s): _____ Approved Destination(s): _____

The applicant, hereinafter referred to as “Driver(s)”, “I”, or “me”, certifies they have a valid Colorado driver’s license and have provided a copy of it and a copy of their current motor vehicle report along with this Application. (MVRs can be obtained from a driver’s license office located at Adams County Government Center 4430 S. Adams County Pkwy., Suite E2001 Brighton, CO 80601 Ph: 720.523.6010, or contact your auto insurance agent for assistance).

I, _____, verify that the vehicle used for travel satisfies the conditions as outlined:

1. The vehicle is in good, operating condition
2. All occupants of the vehicle will use seat belts whenever the vehicle is in motion
3. Volunteers under the age of 18 will NOT be transported in this private vehicle
4. The number of passengers being transported will not exceed the capacity of this vehicle
5. Under no circumstances will cars with a capacity of 12 or more passengers be allowed to transport individuals, the use of any motorcycles, motor homes, recreational vehicles, and convertibles to transport individuals and items is also prohibited.
6. There is auto liability insurance coverage on the vehicle, which meets the minimum Standards of the Colorado Financial Responsibility Law. The District’s insurance carrier recommends that individuals contact their own auto insurance agent to determine appropriate levels of coverage when transporting items and to ensure that this authorization doesn’t violate or void any provisions of their policy.

I agree to follow all traffic laws and district policies while transporting items to and from the approved destinations. I will not carry a concealed weapon, even if I’m legally permitted to do so, while transporting items and performing duties described in my shift type within the “Volunteer Handbook”.

I certify that I will not apply for, or become a Driver in order to complete any and all court mandated community service, and give permission for **ALMOST HOME INC.** to perform necessary background checks to verify my identity.

The insurance company providing coverage for this vehicle is _____

Volunteer Driver (Signature)

Date

Email/Phone Contact Information

Address (street, city, zip)

Return completed application with copies of driver’s license, current motor vehicle report record (MVR), and proof of insurance coverage to ALMOST HOME INC.

