

Employee/Volunteer Usage of Personal Vehicles for School Activities

A number of Members have recently inquired about how the Multi-Line program addresses the above issue. The following is a brief synopsis of the issues involved and how the VSBIT program responds to these issues.

Title 16 V.S.A. § 1756 “requires school districts to indemnify and save harmless any person employed by the school district from financial loss and expenses arising out of any claim or litigation alleging negligence or other act resulting in accidental injury or damage to property, provided that the employee was acting within the scope of his/her employment”.

The VSBIT Multi-Line Program provides coverage for this statutory liability (*including auto*), subject to the policy’s coverage and conditions.

“Volunteers”, as defined in the coverage documents, although not addressed by § 1756 are also covered by the VSBIT Multi-Line Program, but only while acting at the direction of the supervisory union/school district (SU/SD) and within the scope of their duties.

It is important to note that the statutory requirement of § 1756, and resulting VSBIT coverage, apply only to third party claims and not to damage of the employee’s property (i.e. their personal auto).

Given the absence of this physical damage protection, we recommend that consideration be given to the following:

The reduction or elimination of the use of employee/volunteer-owned and operated vehicles for school-related purposes.

To the degree it is necessary to continue to utilize personal vehicles for school-related activities, each supervisory union/school district should:

1) Obtain a certificate of insurance from each employee/volunteer showing Personal Auto Coverage of at least:

\$100,000 per person / \$300,000 per accident (bodily injury) & \$50,000 (property damage) or \$300,000 combined single limit

2) Obtain a copy of each employee’s/volunteer’s valid driver’s license.

3) Consider developing an agreement with employees/volunteers to address the responsibility for physical damage coverage of their vehicles, including deductibles and/or any added premium costs.

If you have any questions regarding this issue please do not hesitate to contact us.

I acknowledge that I have received and/or read a copy of the SU/SD’s Vehicle Use Policy and I understand the contents and agree to comply with the policy. I currently possess a valid Vermont driver’s license or commercial driver’s license and will immediately notify my supervisor if my driver’s license is restricted, suspended, revoked, or expires. I understand that the SU/SD may request my driving record from the Department of Transportation. If operating a personal vehicle on SU/SD business, I will maintain automobile liability insurance coverage on the motor vehicle.

Signed

Date