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This form is to be completed at least annually for individuals for whom any of the following apply:

- Driving on UA business is required by the official job description
- A UA vehicle has been assigned for their use
- Where a CDL license is required for UA work
- Drivers who will be required to drive for a period exceeding 14 (fourteen) consecutive days
- For long distance travel (greater than 50 miles one way)
- Drivers who will transport groups, students, minors, and/or other non-UA affiliated persons

DRIVER To complete this section				
Naı	me:	Date of Birth:	Age:	
Drivers' License #:		Drivers' License Expiration Date:		
£	Attach a copy of driver's license (probationary, court restricted, international drivers' license or a drivers' permit are NOT acceptable)			
£	Attach a copy of UA drivers' safety training course completion documentation			

I certify I am in compliance with all licensing and insurance requirements for the State of Alaska. I agree to notify my supervisor, by the next working day, of any changes to my compliance status, any moving violations I may receive, and to IMMEDIATELY notify my supervisor of any accidents.

I have read and understand the information included in the Transportation Safety Guide. I understand the university's insurance for its vehicles is effective only when the vehicle is being used for authorized university business purposes by an authorized driver. I understand the transportation of pa



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		SUPERVISOR To complete this section		
TRUE				
	1.	Driver has attached all of the above required documents		
	2.	I have obtained and reviewed a copy of the driving record report from the state department of motor vehicles		
	3.	Driver has at least three (3) years of driving experience		
	4.	or older OR This item is Not Applicable		
		If driver is not age 21 or older, he/she is not going to transport groups, students, minors, and/or other non-UA affiliated persons		
	6.	Driver has not been convicted for two or more moving violations in the last three years		
	7.	Driver has not been convicted, or had his/her license revoked, for driving under the influence of alcohol or drugs in the last three years		
	8.	Driver does not have a pattern of moving violations or reckless driving behavior which is		
		demonstrated by the accumulation of more than five points against his/her drivers' license in the last three years		
	9.	Driver has been given the a copy of, or web access to, the UA Transportation Safety Guide and asked to read it		
health a who hav applicab	nd ve ole)	anable to check any of the above boxes, please contact your campus risk management/environmental safety department for assistance prior to authorizing UA driving responsibilities. Only individuals been properly screened prior to beginning work, (including a pre-hire review of driving record, if should be allowed to operate a vehicle on UA business. Contact your campus risk int/environmental health and safety office for non-affiliated or student driver requirements.		
		SUPERVISOR'S APPROVAL TO DRIVE £ YES £ NO		
Supervis	sor	Name (printed):		
Supervis	Supervisor Signature: Date:			
Comme	nts	:		