

IMPORTANT:

**TO BE SUBMITTED WITH A
PHOTOCOPY OF DRIVER'S LICENSE**

[PASTE PHOTOCOPY HERE]

In connection with my application, I understand that my driving record may be requested from ADR (American Driving Records and all agencies acting on behalf of ADR, Inc.). I authorize without reservation, any party or agency contracted by ADR to furnish this information. I understand that ADR obtains all drivers & vehicle information directly from the various state Departments of Motor Vehicles (or a corresponding agency) & does not maintain its own database of driver and vehicle information. I understand that any corrections or updates to my driver record must be made by the state DMV. I authorize ADR to share this information with SU for underwriting purposes.

Must be initialed before application can be processed: _____

REMINDER: Manager must complete the section in grey below.

STUDENT/EMPLOYEE DRIVER INFORMATION:

Last Name: _____ First: _____ Middle: _____
Driver's License: _____ State: _____ Exp: _____ Birth Date: _____
SU Email: _____@seattleu.edu SU ID: _____ Age Range: 19-20 21+
Address: _____ City/State/Zip: _____ Cell Phone: _____

Have you been involved in any moving violations and/or accidents within the past three years?: Yes No ; if yes:

How many such incidents were you involved in?: _____ Were you cited for any of the incidents?: Yes No

Describe the violation(s), including circumstances, location & date, on a separate sheet of paper and attached it to this form.

AUTHORIZATION OF DRIVING RECORD RELEASE & UNIVERSITY RELEASE:

I, _____, an employee / student (**CIRCLE ONE**) of Seattle University, affirm that I am and that I requested a copy of my official Driving Record in the State of Washington (or other listed) be released to university officials.

I further affirm that information stated on this form is accurate. I understand that I am responsible for informing the Seattle University Department of Public Safety & Transportation of any changes which may occur regarding any of the above information during the course of the year. I have read and understand all of Seattle University's policies, procedures and guidelines regarding vehicle usage. If given permission to use a University vehicle, I agree to use the vehicle only for Official University business and to abide by all University use regulations. I acknowledge that only University authorized drivers are allowed to operate/drive the vehicle at any time.

Driver's Signature: _____ Date: _____

APPLICANT RESPONSIBILITY TO COMPLETE THIS SECTION

USE OF VEHICLE AUTHORIZATION:

Manager is defined as cost center head, advisor, and/or person approving budgetary use. Managers, by signing you are acknowledging that the student/employee filling out this form is approved to drive a University vehicle on behalf of your Club/Org/Dept.

Applicants, please list all Clubs/Orgs/Depts. as applicable.

Club/Org/Dept.: _____ Manager's Signature: _____ VEMS Access: Yes No

Club/Org/Dept.: _____ Manager's Signature: _____ VEMS Access: Yes No

Managers, by checking "Yes" to "VEMS Access" you are authorizing the student/employee filling out this form to personally reserve a University vehicle on behalf of your Club/Org/Dept. through the VEMS online reservation system. Checking "No" implies that the Club/Org/Dept. Manager will be personally placing all requests for reservations of university vehicles.

VEHICLE USE GUIDELINES:

Applicant affirms that, if approved to drive, s/he will abide by all state and federal laws as well as the use guidelines (initial each) below.

1. Any and all damages will be immediately reported to the Department of Public Safety & Transportation (DPST). Driver is responsible for filling out a State Accident Report as well as an accident report with DPST. **Initial:** _____
2. Vehicle will not be driven off road. **Initial:** _____
3. Vehicle will not be used for any unlawful purposes, or in any race, speed test or contest. **Initial:** _____
4. Driver will not use nor be under the influence of alcohol, narcotics, intoxicants, prescription drugs or other controlled substances. SU has a no-tolerance policy for the use of any of the former in conjunction with the operation of a motor vehicle. **Initial:** _____
5. Driver and all passengers of Seattle University leased or rented vehicles must be a current faculty, staff, or students. **Initial:** _____
6. Driver will comply with all federal, state, and local laws and regulations regarding the use of mobile technology devices, including cellular phones. **Initial:** _____
7. Mobile calls, sending or reading text messages or e-mails, viewing television, videos or DVDs and inputting data into laptop computers, personal digital assistants or navigation systems is prohibited while driving. **Initial:** _____
8. Seatbelts are mandatory for driver and passengers when vehicle is in motion. **Initial:** _____
9. Driver agrees to have an alternative (authorized) driver in place for one-way trips over 250 miles. **Initial:** _____
10. There is no roof-top luggage loading allowed and internal luggage should not be above seat level. **Initial:** _____
11. Driver will designate the front seat passenger to assist with navigating and caring for passenger needs. **Initial:** _____

DRIVING RECORD REVIEW AND DEFENSIVE DRIVER TRAINING:

Applicant affirms that their driving record meets the criteria below (initial the applicable guideline):

1. Applicant understands that this application is for the current school year only, and affirms that s/he is **19 years of age or older** and that his/her driving record does not include any of the following: **Initial:** _____
 - A). Cited for one or more (at fault) accident within the past 3 years.
 - B). Suspension or revocation of Driver's License within the past 3 years.
 - C). Conviction of Reckless Driving or DUI within the past 5 years.
 - D). Citation for 3 or more non-accident moving violations within the past 3 years.
 - E). Conviction of hit and run, racing, implied consent-test refusal, speeding tickets of 15 mph or more above the legal limit.
2. Applicant has completed the Driver Training(s):
 - A). *Pre-authorization* Screening Complete (**19-20 year old applicants ONLY**). **Initial:** _____
 - B). Driver Safety Training by EduRisk (For ALL drivers of university vehicles). **Initial:** _____
 - C). Van Safety Training (12-passenger vans renters only. In addition to the Driver Safety Training). **Initial:** _____
 - D). Behind-the-Wheel Training scheduled (**19-20 year old applicants ONLY**). **Initial:** _____

Trainings can be found at: <https://www.seattleu.edu/transportation/van-rentals/Driver-Authorization/>

DPST OFFICE USE ONLY:

Completed by Front Desk

- Form Complete
- Driver Safety Training by EduRisk
- Van Safety Training

19-20 year old applicants ONLY: Behind-the-Wheel Training date: _____

Initial & Date:

Completed by Office Staff

- VEMS Account Created
- Recorded in Driver Database
- Email Notification Sent

Initial & Date: