

UCSB Department of Earth Science

DRIVER ATTEST FORM FOR COURSE FILED TRIPS USING UC VEHICLES
THIS AUTHORIZATION IS VALID FOR ONE ACADEMIC YEAR ONLY

A copy of your driver's license must be handed in with this form.

Background Information:

Academic Year: _____

Name: _____

Date of Birth: _____ Perm #: _____

Local Address: _____

Cell Phone: _____ Email: _____

Indicate One: Student _____ Faculty/Staff _____ Volunteer _____

Driving Information:

1. Number of years driving experience (check one):

0-1___ 1-2___ 2-3___ 3-4___ 4-5___ 5+___

2. Driver's License: State _____ Driver License # _____

Vehicle Use Agreement:

As a condition of my signing this form, I attest that I do not have any vehicular convictions or pending actions against me and I agree to a check of my driving record. I understand that it is my responsibility to update the department as to any adverse change in my driver's license status. My driving record may be checked throughout the academic year, and any negative change in the status of my driving record may result in the revocation of the privilege of driving for department business. I understand I may be held liable for any damage or injury involving University or personal vehicles.

I will abide by all relevant UC policy and procedures. These include but are not limited to BUS-23, BUS-39, BUS-46, BUS-

63, BUS-74, BUS-75, BUS-81, G-28. Useful links; <http://www.policy.ucsb.edu/>

<http://www.busserv.ucsb.edu/riskmanagement/autos.htm>

<http://www.busserv.ucsb.edu/riskmanagement/rmi.htm>

Signature of Driver _____ Print Name _____

Date _____

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Return form to department business officer