



Faculty/Staff \_\_\_  
Student \_\_\_  
Other \_\_\_

### DRIVERS QUALIFICATION FORM

NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE # \_\_\_\_\_

◆ Certification

Must have drivers license that is valid in the U.S.

Must be at least 19 years old

DRIVERS LICENSE# \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

DRIVERS LICENSE STATE \_\_\_\_\_

◆ Experience

How many years have you been driving? \_\_\_\_\_ How many miles per year? \_\_\_\_\_

Location: Rural \_\_\_\_\_, Urban \_\_\_\_\_, Interstate \_\_\_\_\_, Mountains \_\_\_\_\_

Did you haul passengers? \_\_\_\_\_ If yes, how many passengers did you haul? \_\_\_\_\_

What road conditions have you driven? Dry \_\_\_\_\_, Wet \_\_\_\_\_, Snow \_\_\_\_\_

What type of vehicles have you driven? Small cars \_\_\_\_\_, Large cars \_\_\_\_\_, Mini-vans \_\_\_\_\_,

Large vans \_\_\_\_\_, Buses \_\_\_\_\_, Trucks: Large \_\_\_\_\_, Small \_\_\_\_\_, Other equipment \_\_\_\_\_

Other explanations:

◆ Driving Record & health questions

Have you had auto insurance refused, cancelled, or expired? Yes No

Have you had a suspended or revoked operator's license in the past five years? Yes No

Have you ever been arrested and detained? Yes No

Do you take any medications that may cause drowsiness? Yes No

Do you have any physical impairment? Yes No

Do you have \_\_\_\_\_heart disease \_\_\_\_\_ epilepsy \_\_\_\_\_ diabetes? Yes No

If so, list the medication(s) prescribed:

How long has the problem been controlled medically?

Have you, while driving a motor vehicle, been involved in an accident during the past 10 years? Yes No

List all accidents regardless of who was at fault and the dates they occurred.

Have you received any speeding or other traffic violation tickets in the past three years? Yes No

If yes, please list the date(s) and violation(s)

I represent the above to be true and valid statements. I will notify Physical Plant Office if there is a change in my driving record or health condition that affects my qualification to drive. I will also authorize EMU to obtain my DMV driving record by signing an "Authorization To Obtain Motor Vehicle Record" form.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**A MANAGEMENT TOOL**" to be use to determine if the operator has a satisfactory driving record:

**Capital Violations:**

If the driver has one or more of the following violations within the last 5 years you are not qualified to drive EMU's vehicles:

1. Driving while intoxicated or impaired or under the influence of drugs.
2. Criminal conviction with a motor vehicle (e.g. felony, hit and run, negligent homicide).
3. Speed in excess of 25 MPH over the speed limit.

**Major Violations:**

These are serious violations incurred at a high frequency that indicate a disregard for public safety. If you have had any of these violations in the last 3 years you are not qualified to drive EMU's vehicles:

1. Any combination of three or more moving violations, "At Fault Accidents" or "Preventable Accidents".
2. Driving with a suspension, revocation or administrative restriction.
3. Leaving the scene of an accident as defined by state laws.
4. Reckless driving.

If you have had any combination of two or more moving violations, "At Fault Accidents" or "Preventable Accidents" in the last 12 months you are not qualified to drive.

❖ **Important Information for drivers of EMU Vehicles:**

- There is emergency information in the sun visor pouch in each vehicle.
- There is an accident report form in the glove compartment in the vehicle that should be completed in the event of an accident.
- You will find the Vehicle Insurance Card in the glove compartment.
- You will find the vehicle registration card in the glove compartment.
- **Before moving the vehicle make sure all passengers have seatbelts securely in place.**

❖ **Standards for operation of EMU vehicles:**

- Must be at least 19 years old
- Must complete Driver Qualification form
- Must have at least two years of regular (daily) driving experience
- Must possess a driver's license valid in the U.S. (**a copy of driver's license should be presented with this form**)
- Must sign additional form allowing driver record check
- Must not have violations exceeding standards listed above

**Additional requirements for van operators:**

- Complete van driving training; drive van thru test course, and instructor logs successful completion of training program
- Must be at least 25 years old or have a CDL, and have 5 years driving (almost daily) experience

**I have read and understand the above Guidelines:**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**I request van drivers training and orientation with EMU's Fleet Instructor (Call Ext. 4389)**

SIGNATURE OF VAN TRAINEE: \_\_\_\_\_ DATE: \_\_\_\_\_

(Name) \_\_\_\_\_ has received training and orientation on  
(date) \_\_\_\_\_ and [IS or IS NOT] (Circle one) approved to operate EMU vans.

(Signature of Trainer) \_\_\_\_\_ (Date) \_\_\_\_\_