



Student Driver Application Form

A Student Driver Application is considered incomplete unless ALL forms are turned in at the same time.

Requirements for New Student Drivers

(Complete if you have **not** been a registered driver for the past 12 months)

- Provide your Driver's License when turning in the Student Driver Agreement Form.
- Read and complete all sections of the Student Driver Agreement Form (on the attached form).
- Authorize TAPS to request a copy of your driving record from DMV.

Requirements for Returning Student Drivers

(Complete if you have been a registered driver in the past 12 months)

- Provide your Driver's License when turning in the Student Driver Agreement Form.
- Read and complete all sections of the Student Driver Agreement Form (on attached page).

DMV Offices in Riverside, California:

6280 Brockton Avenue, Riverside, CA
800.777.0133

6425 Sycamore Canyon Blvd., Riverside, CA
800.877.0133

7010 Magnolia Avenue, Riverside, CA
951.801.4151

<http://dmv.ca.gov>

Office Use Only

Approved by: _____

Driver's License Expiration Date _____



Student Driver Agreement Form

Once completed and signed, this form should be sent to the Office of Risk Management.

Name: _____ Department: _____ E-mail Address: _____

Section I: Minimum Qualifications for Approval

1. Valid driver's license.
2. No DUI convictions, reckless driving convictions or any conviction that has led to a license suspension or revocation.
3. Certificate of completion from UCR Driver Training Program.
4. No physical impairments that affect driving ability.
5. A minimum of 18 years of age.

Section II: Driver Policies

1. Must have your valid driver's license in your possession while driving.
2. Must drive safely and obey all state and local laws/ordinances.
3. Must wear a seat belt at all times; must ensure passengers are wearing seat belts at all times.
4. Must follow rules for vehicle use.
5. Must refrain from consuming alcohol and/or illegal substances; must refrain from prescription or over-the-counter drugs which may cause drowsiness (Check the label or ask pharmacist.).
6. Must refrain from distracting behaviors while driving (*e.g.*, eating, smoking, adjusting radio controls, *etc.*).
7. Cell phones must not be used while driving in any manner, including texting, even if used with a hands-free device.
8. Must only transport individuals/passengers who are on University business (no family members, hitchhikers, or friends).
9. Must not operate vehicle if any of the following are not operating properly: engine, transmission, brakes, tires, lights, steering.
10. Must not operate in extreme weather including: Heavy rain, snow, ice, fog.
11. A driver may not: drive for more than three consecutive hours or drive more than six total hours per day. After driving for three consecutive hours, a minimum break of 15 minutes is required.
12. A driver may not drive a vehicle that carries more than 10 passengers, including the driver.
13. Must comply with passenger limits on vehicle type (vehicle rating).

Section III: Travel Policies

1. Travel is only allowed between the hours of 5 a.m. and midnight except where operation of vehicle is required during the course and scope of UC employment.
2. Automobile travel is limited to 600 miles or 10 hours within a 24- hour time frame per driver.

Section IV: Driver Authority

1. The driver is responsible for the safe operation of a vehicle and, therefore, has the authority to enforce all policies and to ask for compliance from all passengers, *i.e.*, safety belts.
2. The driver is empowered to discontinue trip until all problems are resolved.

Section V: Driver Agreement Understanding

Please initial every statement.

- _____ 1. I have and fully understand the information contained in Sections I, II, III, and IV. Additionally, I agree to abide by conditions set forth in those sections.
- _____ 2. I understand that I am personally responsible for any traffic citations that I may receive, and that the University will not cover such costs.
- _____ 3. I understand that I must report any accident that I am involved in within 48 hours (complete a vehicle accident report).
- _____ 4. I acknowledge and meet all qualifications listed in Section I.
- _____ 5. I understand and abide by all driver policies listed in Section II.
- _____ 6. I understand that any violation that may occur while traveling may be subject to University discipline and/or personal liability.
- _____ 7. I understand that I am required to immediately notify UCR's Earth and Planetary Sciences Department of suspended driver's license, DUI citation, and moving violations and that failure to inform may lead to further disciplinary action and/or personal liability.
- _____ 8. I understand that I am required to provide a current DMV driving record.
- _____ 9. I have read and agree to abide by this agreement and the guidelines regarding University vehicle usage as outlined in BUS- 46, Use of University Vehicles. <http://www.ucop.edu/ucophome/policies/bfb/bus46.html> and [UCR Policy & Procedures 900-50: Use of University Vehicles](#)
- _____ 10. I understand that the University insurance and/or self-insurance program will not cover my own property damage or that of another and will not cover any personal injury if I engage in conduct including, but not limited to: intentional acts of misuse; violating of law; racing, stunting, or reckless activities; non-university business; driving with a suspended or revoked license; allowing an unauthorized driver to drive; allowing passengers on non-university business.
- _____ 11. I understand that students who are not employees are not covered under the General Liability Insurance program.
- _____ 12. I have read, fully understand, and agree to comply with the contents of this document.

Signature of Student Driver: _____ **Date:** _____

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Section VI: Release and Indemnity

"I understand that I am not permitted to drive a University vehicle without a current and valid drivers' license. If I drive a vehicle without a current and valid drivers' license, or on a suspended or revoked drivers' license, I agree, on behalf of myself, my heirs, executors, administrators, insurers and assigns, to defend, indemnify, and hold harmless the Regents of the University of California, its officers, employees, agents and students for any and all liability, loss, expense (including reasonable attorneys' fees) for claims for injury or damage, including my own, arising out of my use of the vehicle."

Signature: _____

Date: _____

By signing below, the department representative approves the above-named student's use of a University vehicle. The department agrees to assume financial responsibility for vehicle charges incurred by the student driver, including charges related to the deductible in the University's self-insurance program.

Faculty Approval (Signature): _____

Date _____

Staff Approval (Signature): _____

Date _____

Department Chair Approval (Signature): _____

Date: _____