

California Institute of Technology Driver Approval Form

All drivers must complete and sign before operating an Institute-owned or leased vehicle.

Driver Name: _____

Phone: _____

Email: _____

Division/Department: _____ Mail Code: _____

Driver's License Number: _____ State of Issuance: _____ Expiration Date: _____

Have more than four years' experience driving in the U.S.? _____

21 years old or older? _____ 75 years old or older? _____

Previously been denied authorization to drive an Institute vehicle for any reason? _____

Will be driving a type of vehicle with which you have little or no experience? _____

Will be driving off-road or in other unique circumstances for which the division/department requires training? _____

Any moving violations/citations/points in the last three (3) years: _____

If yes, please provide detail: _____

I certify that the above information is to the best of my knowledge true and correct and that I have read the Caltech Vehicle Use Policy and agree to act in conformance with its terms and conditions.

Name

Date

Please return form to Division Administrator or Administrative Department Coordinator

Administration Use Only Below Line

Motor Vehicle Records Check Completed
by Security: _____

Date: _____

Driver Training Completed (if applicable): _____

Date: _____

Driver Approved by: _____

Date: _____

Signature

Printed Name

DISCLOSURE REGARDING DRIVING RECORD

Driver Name: _____ Date: _____

Driver License Number: _____ State: _____ Expiration Date:

I understand and approve the California Institute of Technology (Caltech) obtain a driving history report about me and the information contained in the report may be used in whole or in part for the purpose of evaluating and determining my eligibility to drive an Institute vehicle. The report(s) will include the following types of information:

Driving Record

The agency preparing the report identified above is:

Validity Screening Solutions
P.O. Box 860443
Shawnee, KS 66286-0443

Signature

Date: