

## Driver Authorization Application

Submit with copy of valid driver's license. MVR check required before approval. Annual renewal required.

### Applicant Information

Full Name

Employee ID

Department \*

Position/Title \*

Phone

Email

### Driver's License Information

Driver's License Number \*

State Issued

Issue Date

Expiration Date

License Class

Class C (Standard)

Class B (Commercial)

Class A (CDL)

### Vehicle Types Requested

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Sedan/Compact Car

SUV

8-Passenger Van

12-Passenger Van

15-Passenger Van (requires additional training)

Utility Vehicle/Truck

### Driving History Disclosure

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Number of moving violations in past 3 years

Number of at-fault accidents in past 5 years

Has your license been suspended/revoked in past 5 years?

No

Yes (explain below)

**Any DUI/DWI convictions in past 7 years?**

No

Yes (explain below)

**Explanation (if applicable)**

### **Training Verification**

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**Defensive Driving Course completed**

**Course Completion Date**

(MM/DD/YYYY)

**15-Passenger Van Training completed (if applicable)**

### **Certifications & Agreements**

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**I certify all information provided is true and accurate \***

**I authorize Wiley University to obtain my Motor Vehicle Record (MVR) \***

**I have read and agree to the University Vehicle Use Policy \***

I agree to report any changes in driving status within 24 hours

I understand authorization may be revoked for policy violations

### Applicant Signature

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**Applicant Signature**

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Sign above

Date:

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### Approvals

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**Supervisor**

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Sign above

Date:

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**Fleet Manager**

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Sign above

Date:

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**Risk Management**

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Sign above

Date:

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