



**UA DRIVER AUTHORIZATION  
(Category 1 Drivers)**

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This form is to be completed at least annually for individuals for whom any of the following apply:

- Driving on UA business is required by the official job description
- A UA vehicle has been assigned for their use
- Where a CDL license is required for UA work
- Drivers who will be required to drive for a period exceeding 14 (fourteen) consecutive days
- For long distance travel (greater than 50 miles one way)
- Drivers who will transport groups, students, minors, and/or other non-UA affiliated persons

|                                 |  |
|---------------------------------|--|
| <b>DRIVER</b>                   |  |
| <b>To complete this section</b> |  |
| Name:                           | Date of Birth:   |
|                                 | Age:   |
| Drivers' License #:             | Drivers' License Expiration Date:  |
| £                               | Attach a copy of driver's license (probationary, court restricted, international drivers' license or a drivers' permit are NOT acceptable) |
| £                               | Attach a copy of UA drivers' safety training course completion documentation   |

I certify I am in compliance with all licensing and insurance requirements for the State of Alaska. I agree to notify my supervisor, by the next working day, of any changes to my compliance status, any moving violations I may receive, and to IMMEDIATELY notify my supervisor of any accidents.

I have read and understand the information included in the Transportation Safety Guide. I understand the university's insurance for its vehicles is effective only when the vehicle is being used for authorized university business purposes by an authorized driver. I understand the transportation of pa



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|---|---|
| <b>SUPERVISOR<br/>To complete this section</b>  |   |
| <b>TRUE</b>   |   |
|   | 1. Driver has attached all of the above required documents  |
|   | 2. I have obtained and reviewed a copy of the driving record report from the state department of motor vehicles   |
|   | 3. Driver has at least three (3) years of driving experience  |
|   | 4. If transporting groups, students, minors, and/or other non-UA affiliated persons, driver is age 21 or older<br>OR<br>This item is Not Applicable   |
|   | 5. If driver is not age 21 or older, he/she is not going to transport groups, students, minors, and/or other non-UA affiliated persons  |
|   | 6. Driver has not been convicted for two or more moving violations in the last three years  |
|   | 7. Driver has not been convicted, or had his/her license revoked, for driving under the influence of alcohol or drugs in the last three years   |
|   | 8. Driver does not have a pattern of moving violations or reckless driving behavior which is demonstrated by the accumulation of more than five points against his/her drivers' license in the last three years |
|   | 9. Driver has been given the a copy of, or web access to, the UA Transportation Safety Guide and asked to read it   |
| <p>If you are unable to check any of the above boxes, please contact your campus risk management/environmental health and safety department for assistance prior to authorizing UA driving responsibilities. Only individuals who have been properly screened prior to beginning work, (including a pre-hire review of driving record, if applicable), should be allowed to operate a vehicle on UA business. Contact your campus risk management/environmental health and safety office for non-affiliated or student driver requirements.</p> |   |
| <b>SUPERVISOR'S APPROVAL TO DRIVE</b>   |   |
| <input type="checkbox"/> YES <input type="checkbox"/> NO  |   |
| Supervisor Name (printed):  |   |
| Supervisor Signature:   | Date:   |
| Comments:   |   |