



PERSONAL VEHICLE USE

Name: _____ Phone: _____ DOB: _____

Driver's License #: _____ State: _____ Exp. Date: _____

Year/Make of Auto: _____ Vehicle License #: _____

Insurance Carrier: _____ Phone: _____

Liability Limits: _____ Policy #: _____ Expiration Date: _____

I certify that the above information is correct and that the insurance coverage is in force. I understand that while driving my personal vehicle in the course of my duties with the college that I must have liability insurance coverage and a valid driver's license as required by the State of California. I agree to advise the college, in writing, of any changes in the above information. I further certify that the above vehicle is mechanically safe.

If you drive your personal automobile while on college business and you are involved in an accident, by law your liability insurance policy is used first. The college liability coverage would be used only after your limits have been exceeded. The college does not provide comprehensive or collision coverage to your vehicle.

All persons driving on college business will: (1) follow the most direct route; (2) avoid unnecessary stops; (3) transport only authorized persons, no guests or students; and (4) ensure that all vehicle occupants use seat belts if available in the vehicle. Privately owned vehicles drivers are responsible for any and all traffic tickets and violations. Privately owned vehicle drivers are also responsible for any and all toll road costs incurred.

Attach a photocopy of "Proof of Insurance" provided by your automobile insurance company that indicates expiration date of insurance. The college may obtain a driving record check from the California Department of Motor Vehicles through the DMV Pull Program.

Signed _____ Date _____

Site _____ Purpose _____

Approval _____ Date _____