



# University of Lethbridge Driver Agreement PS II Driving for University Business & Sponsored Activities

This agreement must be completed by any participant in Field Work or Other University-Sponsored Activity who will be driving a U of L owned vehicle, rental vehicle, or personal vehicle with other participants as passengers. The driver must agree to the terms and conditions in order to drive for the University activity.

The personal information requested on this form is collected under authority of the Alberta Post-secondary Learning Act (Alberta) and section 33c of the Freedom of Information and Protection Act (Alberta) (the "Act") and will be protected under Part 2 of the Act. The information is collected for the purpose of determining driver suitability for driving on University sanctioned activities. Questions related to the collection use or disclosure of your personal information can be directed to the University of Lethbridge Privacy Office, 4401 University Dr. W, Lethbridge, Ab T1K 3M4, 403-332-4620, email: foip@uleth.ca

### A. Driver Information:

Name of Driver: \_\_\_\_\_ Department: \_\_\_\_\_

ULeth email: \_\_\_\_\_ ULeth ID#: \_\_\_\_\_

I have a valid Operators License:            Yes            No

My license has a: GDL Restriction            Yes            No

**NOTE:** To drive a University fleet vehicle the license holder must have passed the Class 5 advanced GDL exit road test.

#### Please check one:

I am driving for:

Employment University Business

Course Related Activity

As a driver for event/resident life

1. I have a valid Operators License, detailed above, for the vehicle I will drive. My Operators License has not been under probation or suspended in the last three years. If you have been prohibited or suspended from driving in the last three years, you cannot drive others on U of L sponsored activities.

Yes suspension

No suspension

2. I have less than seven (7) demerits against my operator's license. If you have more than 7 demerits you cannot drive others on U of L sponsored activities.

Yes, I have less

No, I have more

### B. University owned vehicle use:

I am driving a University owned vehicle for University business:            Yes            No

Department: \_\_\_\_\_ Supervisor: \_\_\_\_\_ (if yes)

### C. Privately owned vehicle use for University business:

The minimum amount of Third Party Liability (TPL) required by law across Canada, (except Quebec) is \$200,000.00 and it is possible that a vehicle may be insured for less however, amounts under \$1,000,000.00 are too low when carrying passengers for University business. I understand and agree that if I am carrying passengers on U of L sponsored activities my TPL must be a minimum of \$1,000,000.00.

VEHICLE REGISTERED OWNER'S NAME (if different than driver): \_\_\_\_\_

VEHICLE OWNER'S INSURANCE/COMPANY BROKER: \_\_\_\_\_

LIABILITY LIMIT: \_\_\_\_\_

I have a minimum TPL of (\$1,000,000.00)    Yes            No

IMPORTANT: I understand if I am frequently using my vehicle to travel on U of L field work or other University-sponsored activities and if I am being reimbursed for the use of my personal vehicle (gas only, mileage, etc.), I should contact my personal insurance broker/agent to determine whether it is necessary to obtain either a Business Use Endorsement or a Passenger Endorsement on my auto insurance policy. Insurance companies require notification of a significant change in use of a vehicle because it may change the amount of risk associated with insuring it.

#### D. Rental vehicle use for University Business:

4. A. I will register with the automobile rental agency as an additional/authorized driver for the rental agency's purpose.
- B. I will ensure the vehicle is rented for University business.
- C. I will purchase and accept the collision damage waiver (CDW/LDW) at the rental agency if I have no alternate coverage (i.e. credit card or personal auto insurance extension).

Ok I Understand

#### E. General Agreement All Drivers and Vehicle Types:

5. I have a valid Operator's License, for the vehicle I will drive.
6. I have no more than seven (7) demerits against my operator's license.
7. I will follow all conditions/endorsements that are noted on my license.
8. I agree to operate the vehicle in a safe manner and to abide by the laws within the jurisdiction(s) where I drive on the field work or other university-sponsored activity.
9. I agree to limit the number of passengers to the number of usable seat belts and will not allow passengers to ride in the back (box) of a truck and ensure all passengers wear seat belts while driving on the activity.
10. I agree to be responsible for any moving/parking violations I may acquire as a result of driving for University business/activity.
11. Distracted driving is a form of impaired driving as **a driver's judgment is compromised when they are not fully focused on the road.** Distracted driving includes, **but not limited to:** Talking on a cell phone, texting, reading, using a GPS, watching videos or movies, personal grooming, and driving while fatigued (mentally and/or physically). I understand and agree to not drive distracted.
12. I understand and agree that in the case of an auto claim, the vehicle owner's automobile liability is the first line of insurance.
13. I agree to immediately inform my supervisor if any of the information provided on this form or driving record changes.
14. I agree to file a C.A.I.R. (Campus Accident Incident Report) any accident or injury that occurs while driving in connection with an activity sanctioned by the University of Lethbridge.

#### I agree to the general terms and conditions:

I certify that the information contained in this agreement is accurate to the best of my knowledge. I have read, understand and agree to the Terms and Conditions listed above for being authorized to drive the rental fleet or personal vehicle on the field work or other university-sponsored activity and give the University permission to reference my insurance policy in the event of an accident or claim any time within one year following my signing or submitting electronically of this form.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*Save document to desktop and email to Kelly Vaselenak: [kelly.vaselenak@uleth.ca](mailto:kelly.vaselenak@uleth.ca)

**Signature on this document can be waived if sent through your U Leth email account.**