



**VEHICLE USE AGREEMENT**

Original Agreement                      Update to Existing Agreement

The information you are being asked to provide will be used by The St. Cloud Technical and Community College personnel to determine your qualification to drive vehicles on state business which can include department vehicles, leased vehicles and your own personal vehicle. You are not required by law to provide this information but if you do not do so you will not be approved to drive vehicles on state business. A refusal may result in your removal from consideration for hire or from employment in the subject position with the requesting agency.

The information on this form will be accessible by your supervisor and other system personnel who need the information for the assigned work. Your Driver’s License Number may be used to obtain a driver’s license record from the Driver and Vehicle Services Division for each state where you have held a driver’s license in the past five years.

Fully complete this form and return it to the Safety & Security Office 1-401G. Please type or print clearly, illegible or incomplete agreements may not be processed in a timely manner.

Department/Division: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Driver’s License Number: \_\_\_\_\_ State Issued By: \_\_\_\_\_ Tech ID: \_\_\_\_\_  
Driver’s Date of Birth: \_\_\_\_\_ Driver’s Phone #: \_\_\_\_\_ (home/work /cell)  
Driver’s Email: \_\_\_\_\_ (home / work)  
Status: Student Full-Time Employee Part-Time Employee Contractor

**DRIVER’S RESPONSIBILITIES:**

Driver Agrees to:

1. Be familiar with the State’s and agency’s Driver’s License and Record Checks policy.
2. Maintain an active, valid, and appropriate driver’s license; drive responsibly and adhere to all traffic laws.
3. Notify the supervisor no later than the beginning of you next shift after losing your driver’s license through suspension, revocation, cancellation, disqualification or expiration.
4. Abstain from driving a state vehicle and/or driving on state owned or leased property if you do not have an active, valid and appropriate driver’s license.
5. Maintain liability insurance on your own vehicle if you use it for work purposes. Liability insurance is required for vehicles per MN Statute 65B.48 Subd.1.
6. Avoid using cell phones, texting and/or other communication devices while driving; during system related travel, use of cell phones is recommended only when the vehicle is stopped in a safe location. **State law prohibits texting and driving.**

I acknowledge that I have read and understand the Driver’s Responsibilities noted above. I also agree to abide by all applicable policies, guidelines, and laws. Additional information on driver’s responsibilities can be found at <http://www.sctcc.edu/fleet-vehicle-safety>

I AUTHORIZE ST. CLOUD TECHNICAL AND COMMUNITY COLLEGE TO OBTAIN MY DRIVER’S LICENSE RECORD FROM ANY STATE WHERE I HAVE HELD A DRIVER’S LICENSE IN THE LAST 5 YEARS. I ALSO UNDERSTAND THAT MY DRIVER’S LICENSE RECORD MAY BE OBTAINED AND REVIEWED ANNUALLY IN CONJUNCTION WITH THIS VEHICLE USE AGREEMENT.

I agree to update this Agreement in the event of a change to any of the data supplied above or when a period of 5 years has passed since the submission of this Agreement. I also agree to inform my supervisor in the event of license revocation, restriction, or suspension.

\_\_\_\_\_  
Applicant’s Signature

\_\_\_\_\_  
Date