



Student Driver Application

Name: _____ College ID# _____

Where are you employed on campus? _____ Title? _____

For what club/organization(s) are you requesting permission to drive? _____

Faculty/staff advisor to club/organization _____

Local Address _____ Local Phone # _____

Home Address _____ State _____ Zip Code _____

NYS Driver License # _____

Please read and sign the following statement:

"I attest that I currently and for the last two years have possessed a valid driver license. I further attest that I have not had more than one moving violation (including speeding tickets) within the past three years and have not been convicted of either DWI or DUI within the past five years. I understand that I must immediately report any change in license status (subsequent to this application and its approval) to University Police.

I consent to a review of my driving history by SUNY Cortland through the License Event Notification System (LENS) or equivalent system. I understand that my driving record will continue to be monitored as a provision of my ability to drive State vehicles.

There is a separate training and approval process to drive any size van.

"I understand that when driving a State vehicle it is my responsibility to:

- inspect the vehicle prior to operation (*per instructions from the Transportation Center*).
- ensure that the number of occupants does not exceed capacity of the vehicle
- ensure that all occupants are wearing seatbelts at all times
- ensure that no alcohol or other drugs are allowed in vehicle
- ensure that the amount of time I spend behind the wheel is not excessive"

Signature _____

Date _____

ALLOW A MINIMUM OF TWO WEEKS FOR APPROVAL

Submit to: University Police (C-17 Van Hoesen)

A copy of this application will be mailed to the student, campus organization, and/or campus employer upon approval/denial.

Direct questions to: Student Affairs
407 A Corey Union
753-4721

Office Use Only
Date Driving History
Reviewed _____

Review Program Used _____

Reviewed By (name) _____

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