

ASSOCIATED STUDENTSCalifornia State University, Fullerton, Inc.

For Office Use Only:
Driver's License
Insurance
Driver's Training

AUTHORIZATION TO USE PRIVATELY-OWNED/RENTED VEHICLE

This form authorizes the use of a personal vehicle or a rental vehicle in the conduct of official business for Associated Students, CSUF, Inc. ("ASI"). Prior to being authorized for travel and/or being eligible for travel reimbursement, this form must be completed and submitted to TSU 218 with clear copies of the driver's auto insurance card and driver's license. *If renting a vehicle, driver must take full insurance coverage from rental agency.* Failure to comply with these instructions may jeopardize reimbursement and/or negatively affect future driving privileges.

Name:	Address:	
City:	Zip Code:	Telephone #:
Email address:	California Driver's License #:	
Description of Car(s):		
	(Year / Make / Model)	(Vehicle ID #)
	(Year / Make / Model)	(Vehicle ID #)
I am participating in the fo	lowing ASI program/council:	
[] Yes [] No If y	ou answered "Yes," you are NOT au	it-and-run offense in the last five years. thorized to drive until you have spoken (b) with the Director of Program Support in
	tialing after each of the seven follow	wing points, I attest that I have read and
understood the following:1. I hereby certify that whene insurance in my possession		valid driver's license and proof of liability
, · ·		nical condition and meets all requirements of the
3. I agree that the vehicle I o will use the safety belts. [perate is equipped with safety belts in op]	perating condition and that I and my passengers
hold harmless ASI, the State Fullerton, and all of their of	e of California, the Trustees of the Califo	e is a consequence of my own choice. I save and ornia State University, California State University s against any claim arising out of the use of said ss of ASI.
5. The automobile insurance in	needs to meet the minimum requirement of one person; \$30,000 for injury to or compared to the	as prescribed by State Law (\$15,000 for death of two or more persons in one accident;
6. I understand that this form	authorizes me to drive ONLY the above	listed vehicle. I further understand that if I tion to Use Privately Owned/Rented Vehicle form
7. Due to concerns about the that ASI prohibits the use of		nd new legislation concerning same, I understands (cell phone, PDA, BlackBerry, etc.) while driving
Signature:		Date:

Upon expiration of your driver's license and/or your insurance, you must reactivate your authorization by updating your information in TSU 218.