Authorized Driver / Key Fob Agreement Form

In consideration of the University of San Francisco’s policies and regulations to operate a University-owned vehicle, I comply with the following terms and conditions:

❖ As a driver of a University-owned vehicle, I understand that it is my responsibility to operate the vehicle in a safe manner and to drive defensively to prevent injuries and property damage.

❖ I must have a valid driver’s license for the type of vehicle to be operated and keep the licenses(s) with me at all times while driving.

❖ I understand that the University will periodically review my Motor Vehicle Record from the DMV.

❖ I understand that monthly speeding reports will be evaluated by University leadership to encourage and ensure safe driving.

❖ As an Authorized Driver, I must comply with all applicable regulations.

❖ I will not allow any other individual to use my University-issued key fob and recognize doing so will result in revoking my rights and privileges to drive University-owned vehicles.

❖ I understand if my University-issued key fob is misplaced, lost, or stolen, this will result in a fee of $5 to replace it with a new fob.

Department

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Print Name:

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Employee’s Signature

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Date: