



UNIVERSITY OF  
SAN FRANCISCO

CHANGE THE WORLD FROM HERE

## Authorized Driver / Key Fob Agreement Form

In consideration of the University of San Francisco's [Vehicular Use Policy](#) 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 will comply with all applicable regulations.
- ❖ I must have a valid driver's license for the type of vehicle to be operated and keep any necessary licenses 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 and Risk Management to encourage and ensure safe driving. Unsafe driving may result in a warning/s. Excessive warnings may result in driving privileges being revoked.
- ❖ 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.
- ❖ In order to ensure the accuracy of monthly/weekly speeding reports, I will use my key fob for every trip, no matter its length and duration.
- ❖ **Anyone driving 85 mph and above will have their driving privileges immediately revoked.**

Please ensure the fields below are filled out completely and sent to the Department of Risk Management at [usftravel@usfca.edu](mailto:usftravel@usfca.edu). Please see the [Driver Authorization page](#) for further details.

Department:

---

Print Name:

---

Employee's Signature:

Date:

---