

AUTHORIZATION OF APPROVED DRIVER OF UNIVERSITY-OWNED VEHICLE

I hereby authorize the below-named person as an authorized driver of a University of Idaho vehicle for the situation and period of time described herein. The authorized driver does possess a valid driver's license and has been apprised of the rules and regulations associated with the use of a university vehicle, and will use the vehicle only on university business. In case of an accident, my unit will be responsible for the insurance deductible if there is an insurance claim filed for repair to the vehicle as a result of the accident.

Name of Authorized Driver(s):		
Purpose of Travel:		
Dates of Travel:		
Printed Name of Authorizing Official		
Signature of Authorizing Official (president, provost, a vice president, dean or director)	 Date	

Cc: Risk Management (2433)

Original in Authorizing Official's office file