John Carroll University Van Fleet Policies & Procedures Driver Certification Request Form

Please complete the form below and return to the Office of Student Activities, Suite 201 in the Lombardo Student Center, along with a copy of your valid driver's license, motor vehicle report (MVR), and \$10 cash or check to continue the certification process. This form will not be processed without a valid driver's license, MVR, and \$10 fee.

Personal Information			
Name:		Banner ID:	
School Address:			
Cell Phone Number:		E-mail:	
Anticipated Graduation Year: Driver's License #:		Date of Birth (mm/dd/yy): State: Exp.:	
	Employee of the Cen	ter for Service & Social Action	
Motor Vehicle Accidents & Please list any driving violation years. If none, please indicate	ons and describe any acc	cidents in which you were involved as a driver in th	ne last three (3)
Date Description o	f Accident/Offense/Viol	lation Injuries/Fine/Penalty	
		t reserve and operate any van that is involved in	
conducted by the Risk Mana		be subject to paying a \$1,000 deductible through e JCU judicial system.	1 a process
	tions or citations are incl and understand the Van I	luded and that the above is true and accurate to the Fleet Policies and Procedures and commit to uphology-owned vehicles.	
Signature			