



## POLICY & PROCEDURE DOCUMENT

NUMBER: 3.7011

DIVISION: Finance & Administration

TITLE: Policy for use of Vehicles Insured by the University

DATE: July 15, 2011

Authorized by: K. Ann Mead, VP for Finance & Administration

Issued by: Office of the CFO

### I. PURPOSE AND SCOPE

Members of the Western Kentucky University community engage in many activities requiring transportation. The University is committed to protecting both the vehicles and *especially the people* involved in these activities. Because of the hazards such transportation activities may involve, the following policy has been adopted by the University.

This policy is applicable to anyone driving a University vehicle that is insured under the University vehicle insurance policy. Any person wishing to drive such vehicles must be on the University Approved Drivers List. **In order to be authorized as an Approved Driver the applicant must follow the procedures as described in this policy. (See University Approved Drivers).**

### II. POLICY

#### A. University Vehicle Defined

“University Vehicles” include all vehicles owned or leased by the University, as well as all vehicles rented for University use. All such vehicles fall under the authority of this policy, including vehicles controlled by individual campus departments or colleges.

#### B. University Approved Drivers

1. Driving a University vehicle is a privilege conferred by the University at its discretion, and only "University Approved Drivers" are permitted to drive University vehicles. Requirements for approval are outlined in this section.
2. The requesting driver must complete a "Release and Applicant Information Form" (Appendix A). A copy of the driver's current valid driver's license must be attached to the form. In some cases, the Risk Management Office may require an inspection of the original license.
3. To be approved the driver must be at least 18 years of age and meet one of the following criteria:
  - a. University Employee (including student employees)
  - b. Current member of University Spirit Masters
  - c. Student with a University Employee present
  - d. Student driving within Warren County
  - e. Members of the immediate family of those University Employees who have vehicles provided to the employee by the University on a 24 hour, 7 days a week basis
  - f. Other individuals on an absolute need to drive basis, as approved by the Risk Management Office upon recommendation by the appropriate supervising administrator
4. Drivers under the age of 21 (other than Spirit Masters) are not permitted to drive vehicles that are transporting more than 5 passengers.
5. The University reserves the right to deny use of a University vehicle to any individual.
6. Drivers are expected to exercise prudence and to abide by all applicable laws. They should not drive more than 10 hours per day. Combination work/driving time should not exceed 14 hours in any one 24 hour period.
7. If a visiting speaker, performer, lecturer or other guest of the University is to be provided with transportation, a vehicle can be rented on a short term basis, in the University's name, at the discretion of the appropriate department.
8. The driver and all passengers are required to use seat belts or safety restraints.
9. Approved Drivers are required to notify the Risk Manager immediately if their driver's license is suspended or revoked for any reason.
10. Use of vehicles will be for University authorized business only, with approved exceptions.
11. Except in an emergency situation, individuals who are not "University Approved Drivers" are not allowed to drive a University Vehicle.

C. Cell Phone Usage and Safety

Approved drivers should be familiar with the Western Kentucky University cell phone policy.

D. Accidents

1. In case of an accident, the driver should do the following:
  - a. Notify the proper police authority

- b. If there are injuries, notify the Office of the CFO immediately at 270-745-5859. Voice mail is available after business hours. You should confirm that the message was received on the next business day at 8 AM.
  - c. Complete and submit within two working days the “On-Site Accident Form” (which should be maintained in the vehicle’s glove compartment)
  - d. If the injured person is an employee, notify the Workers Compensation Specialist in Human Resources (270-745-8841) as soon as possible.
  - e. Driver is responsible for obtaining a copy of the police/accident report (usually available within a week to 10 days), and attach same to a completed WKU “Vehicle Accident Report” available on line at the Finance & Administration forms web page: <http://www.wku.edu/finadmin/forms/index.php>
2. The responsible department/division’s budget will be assessed an amount equal to the University’s deductible and an additional assessment of \$250.00 for any accident that results in payment by the University’s insurance company, with the exceptions of uninsured motorist and glass breakage.

E. 15 Passenger Vans

Anyone requesting to drive a 15 passenger van must complete a driver training course administered by Facilities Management.

F. Driver Disqualifications

The following criteria will be considered as a guide in driver disqualifications. The University reserves the right to either disqualify or qualify individuals based on the severity of an offense or accident.

1. Have any one of the following (Type 1 – see matrix below) citations on the driver’s Motor Vehicle Record:
  - a. Conviction for reckless driving
  - b. Leaving the scene of an accident
  - c. At fault in a fatal accident
  - d. Felony conviction involving a vehicle
  - e. Conviction for alcohol and/or drug-related driving offense
  - f. Refusal to submit to blood alcohol test
  - g. Driving on a suspended license
  - h. Failure to appear in court
2. Have any combination of four moving violations and at fault accidents (see matrix below). Examples of moving violations are:
  - a. Running a red light
  - b. Ignoring a stop sign
  - c. Speeding
  - d. Passing a stopped bus
3. Matrix Definitions
  - a. Borderline – Motor Vehicle Report will be checked every 6 months; approval subject to no deterioration in the record.
  - b. Prohibited – Employee is prohibited from driving University insured vehicles.

## DRIVER ACCEPTABILITY MATRIX

Number of Moving Violations Within Past Three Years	Number of Accidents Within Past Three Years					Number of Type 1 Citations Within Past Three Years
	0	1	2	3	4	
0	Clear	Acceptable	Acceptable	Borderline	Prohibited	Prohibited
1	Acceptable	Acceptable	Borderline	Prohibited	Prohibited	Prohibited
2	Acceptable	Borderline	Prohibited	Prohibited	Prohibited	Prohibited
3	Borderline	Prohibited	Prohibited	Prohibited	Prohibited	Prohibited
4	Prohibited	Prohibited	Prohibited	Prohibited	Prohibited	Prohibited

Borderline
Prohibited

Motor Vehicle Report will be checked every 6 months; approval subject to no deterioration in the record.  
Employee is prohibited from driving University insured vehicles.

### G. Reinstatement of Driving Privileges

Reinstatement of driving privileges will be considered on a case by case basis as appropriate.

### III. **PROCEDURE**

After reading the above policy:

1. Complete a "Release and Approved Driver Request Form," with a copy of a current driver's license, and submit to the Insurance Office, WAB G-21.
2. The form should be submitted at least one week prior to driving date.
3. Applicants will be notified by email when they have been added to the Approved Driver's List.
4. Drivers on the approved list will remain on the list until they request to be removed or are removed by the University.
5. Drivers consent to the University conducting a Motor Vehicle Record check periodically to verify the Driver's driving record

### Appendix

- A. Driver Release and Application Information Form

**WESTERN KENTUCKY UNIVERSITY**  
**RELEASE AND APPLICANT INFORMATION FORM**  
**Approved Drivers of University Vehicles**

**Office of the CFO**  
G21 Wetherby Administration Bldg.

1906 College Heights Blvd. #11002  
Bowling Green, KY 42101-1002  
270-745-2035

Requestor Information:

Applicant Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Last, First MI (as appears on Driver's License)

WKU Department: \_\_\_\_\_ WKU ID #: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_

WKU Address: \_\_\_\_\_ Applicant E-mail: \_\_\_\_\_  
(Building & Room Number)

Applicant Home Address: \_\_\_\_\_  
Street Address City and State Zip Code

Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

License Expiration Date: \_\_\_\_\_ Years Driving Experience: \_\_\_\_\_

Type of Vehicle to be Driven:	Type of Driver:
WKU Owned: _____	WKU Employee (Includes Student Employee): _____
Loaned/Leased to WKU: _____	Student, with WKU Employee Present: _____
Short Term Rental: _____	Student, Driving Alone: <small>(Restricted to Warren County)</small> _____
	Spirit Master _____
	Other - See Vehicle Use Policy _____
	<small>(Attach Statement with Reason for Driving WKU Vehicle)</small>

List all states in which you have been a licensed driver for the past 3 years:  
\_\_\_\_\_

List any moving violations in the past three years (if none, so indicate):  
\_\_\_\_\_

In connection with this application, I understand that investigative background inquiries may be made on me concerning matters of motor vehicle information. I understand that the University may be requesting information from various Federal, State, and other agencies which maintain records concerning past activities relating to my driving records.

I authorize, without reservation, any party or agency to furnish the above information and release all parties involved from any liability and/or responsibility for doing so. I hereby give consent to **Western Kentucky University** and **Tri City Insurance Service Inc.**, and/or any of their agents to obtain such information. This authorization and consent shall be valid in an original, fax or copy format. I recognize that these inquiries may be made randomly in the future and no further authorization is required by me.

I certify by my signature that I have not been convicted of an offense of operating a motor vehicle while under the influence of any drugs/alcohol within the last 3 years, nor am I under any restrictions regarding the operation of a motor vehicle. I understand that I am to notify (in writing) the WKU Risk Management Office of any driver's license suspension or revocation for any reason.

Failure to provide information requested may result in a delay of WKU driving privileges.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

ATTACH COPY OF DRIVER'S LICENSE