

ADMINISTRATIVE APPROVAL & RESPONSIBILITY COMMITMENT

Faculty/Staff Student Purpose for Driving: _____

ON-CAMPUS DRIVING?: _____ OFF-CAMPUS DRIVING?: _____

IF YES, TYPE OF VEHICLE: _____

SUPERVISOR'S SIGNATURE (Required): _____

The following guidelines are for Johnson University drivers – on and off campus.

Please Initial:

____ ALL occupants must wear seat belts when driving off campus.

____ Obey posted speed limits. Reduce your speed when road or weather conditions are poor.
Tickets, received while operating a University vehicle, are the responsibility of the driver.

____ Back the vehicle safely. A passenger should get out of the vehicle and visually assist the driver with backing safely. *Drivers and responsible passengers may be charged for damages from a backing accident.*

____ **Talking on the cell phone** while driving a Johnson University 15 passenger van, Turtle van or the large bus **is prohibited** by Johnson University policy.

____ Any use of **texting** while driving any Johnson University vehicle is prohibited and is a **violation of Tennessee and Florida Law.**

____ Immediately report any accident to your supervisor and Johnson University Plant Services Office. *Insurance papers, vehicle registration, and emergency contact information are located in the glove box or on the sun visor.* If you are involved in an off campus accident, call 911. Wait for local authorities to arrive. Do not move the vehicle if anyone is injured.

____ If applicable, 15-passenger van and turtle bus drivers must review additional safety information. See the Plant Services web page or contact the EHS office at #3425.

I have read these guidelines and agree to abide by them:

Signature

Date

Print Name

Reviewer

Date

Date Sent to Insurance _____	Insurance Approved Y/ N Date _____ Reason for Rejection: _____	Mult-passenger van training Exam Date _____ Trainer _____ Road Test Date _____ Trainer _____ Class F Y / N
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