

## Clarkson University

### Directions for **DRIVERS INFORMATION APPLICATION:**

1. Complete the Clarkson University driver application. You must be at least 19 years old and have at least two years of driving experience in order to qualify.
2. Submit the application along with a copy of your Driver's License to Julie Besaw by email to [jbesaw@clarkson.edu](mailto:jbesaw@clarkson.edu), or drop it off to the Human Resources office on the 1<sup>st</sup> floor of Graham Hall. Please make sure that all requested information is completed, including a **valid department account number**. We won't be able to process your application without this information.
3. We will submit your information to Samba Safety for a copy of your driving record. We are not able to look up driving records from California or Pennsylvania. Therefore, it will be the applicant's responsibility to provide Human Resources with a copy. You will be notified by email if this is needed.
4. After your application is reviewed by the HR Coordinator and Chief Human Resources and Employee Inclusion Officer, you will be enrolled in the Driver Safety Program on Moodle through the Clarkson Website. You will then receive an email with information and a link to the training program.
5. Complete both videos and quizzes, a grade of **80%** is required to pass. You may take the test twice as needed to pass. Please let us know when you've completed the training so we can prompt you to the final step.
6. Once the driver safety training is completed, a copy of the Vehicle Usage Policy will be emailed to you for review and signature.  
*Your final approval will be granted once we receive this signed policy.*

***NOTE: This is a three step process and could take 3-5 days to determine approval. Please plan accordingly, when submitting your application.***

**Clarkson University  
Driver Information Application**

*The University's Comprehensive Liability Carrier requires the following information from all employees/spouses and students who drive University-owned/leased vehicles:*

Full Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

*(Please provide a copy of your Driver's License)*

Department Driving For: \_\_\_\_\_

Department Account No: \_\_\_\_\_

Department Supervisor: \_\_\_\_\_

List all accidents or violations within the last 36 months

*I authorize Clarkson University to review my motor vehicle record (MVR) prior to approving me to drive a University vehicle. As an approved University driver, I authorize Clarkson University to review my motor vehicle record at their discretion.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please check the appropriate box:**

Faculty/Staff

\*\*Student

\*Non-employee

Student Number \_\_\_\_\_

Student Research/  
Teaching Assistant

Summer Programs

\*Non-employees – Please indicate reason for driving university vehicle.

**\*\*ALL STUDENT EMPLOYEES MUST BE REGISTERED WITH STUDENT EMPLOYMENT SERVICES, AND MUST BE AT LEAST 19 YEARS OF AGE.**

*Please return this completed application & a copy of your driver's license to the Human Resources Coordinator at Graham Hall, mail to Box 5542, or email to [jbesaw@clarkson.edu](mailto:jbesaw@clarkson.edu) or by fax to 315-268-4437.*