

VOLUNTEER/NON-AFFILIATED DRIVER PROCEDURE

Volunteer or non-affiliated drivers may operate University vehicles if the following criteria are met. Each driver must obtain and complete a volunteer driver agreement. The form on page 2 in this PDF should be submitted to the fiscal officer approving the vehicle request. The fiscal officer must attach a letter of justification for the volunteer/non-affiliated driver and the completed volunteer driver agreement to the vehicle request. The letter of justification should state the reason for needing a volunteer/non-affiliated driver, (i.e., safety, travel distance, etc.) The letter also needs to state what position the individual will be holding during this assignment, such as grad student, extra help, or contractual employee. The State of Illinois Auto Liability Program will provide vehicle coverage for the volunteer/non-affiliated drivers who are acting on behalf of a recognized Southern Illinois University department. All policies and procedures for the use of a university vehicle must be adhered to. The letter of justification, volunteer driver's agreement, and vehicle request should be forwarded to Travel Service. Travel Service will then obtain approval from the Director of Plant and Service Operations. If we have any questions or concerns we will contact you at the phone number listed on the agreement form. All forms will be attached to the Travel Service vehicle request copy and filed. In the event of an accident involving volunteer/non-affiliated drivers, Travel Service should be contacted within 24 hours for assistance in the preparation of any accident reports. Travel Service will forward copies of all related agreements and letters associated with the vehicle rental to University Risk Management for its investigation.

Should you have any questions regarding the procedure, please call SIUC Travel Service at 453-3357.

Effective: 2/01/07

Revised: 2/01/07

AGREEMENT TO SERVE AS VOLUNTEER DRIVER

In the event that I should be involved in a motor vehicle accident while operating a Southern Illinois University owned or leased vehicle, I will cooperate fully with any investigation necessary regarding the facts of the accident and in the defense of the claim if suit is filed. If I am a non-affiliated passenger only, I will cooperate fully with any investigation necessary regarding the facts of the accident and in defense of the claim if suit is filed.

I understand that any vehicle accident must be reported immediately to the Travel Service office or I risk forfeiture of coverage.

Signature

Date

Print Name

University Department

Department Phone Number

Fiscal Officer Approval

Date

Director of
Plant and Service Operations

Date

Place Copy of License Here:

Check if Non-Affiliated Passenger Only