

Driver Application¹

Location Information (completed by Location)

Location: _____ City: _____

Requested By: _____ Date Requested: _____

Email: _____ Phone: _____

Driver Information (completed by Location)

Driver's Full Name: _____

Date of Birth: _____ If under 21, **do not submit**. No driving privileges are allowed for drivers under 21 years old. If age 75 or over, submit with medical certification.

Driver's License Number: _____ State of Issue: _____ If not issued in the United States, **do not submit**. A valid United States driver's license is required for all approvals.

Driver's Current Address: _____

Driver's Email: _____

Type of Authorization Requested (completed by Location)

- No Passengers² (code: No Passengers)
- Passengers in Any Motor Vehicle except Buses³. **Do not submit** unless driver has at least 3 years driving experience. (code: Passengers No Buses)
- Passengers in Any Motor Vehicle except School Buses. **Do not submit** unless driver has at least 5 years driving experience and a Commercial Driver's License with the P endorsement. (code: Passengers No School Buses)
- Passengers in Any Motor Vehicle. **Do not submit** unless driver has at least 5 years driving experience and a Commercial Driver's License with the P and S endorsements and valid medical certificate and S endorsement certification. (code: Passengers All Vehicles)

Driver History (completed by Driver)

1. How many years have you been licensed in the United States? _____
2. Have you had any "major motor vehicle violations"⁴ during the last seven years?
Yes / No If Yes, **do not submit**. No driving privileges are allowed for drivers with any major violations in the last 7 years.
3. Have you had any other motor vehicle violations, failure to respond suspensions, or at-fault accidents (collectively "minor motor vehicle violations") during the last three years?
Yes / No If Yes, provide date(s) and description(s) on a separate attachment. **Do not submit** if number of minor motor vehicle violations is over 3 or if years licensed is less than 3 and count is 1 or more or if years licensed is 3-4 and count is 2 or more.

I certify that all driver related information in this Driver Application is true and complete to the best of my knowledge.

Driver's Signature _____ Date _____

¹ This application is used for driver approvals. Driver approval is required for any driver that operates a location owned auto, rental car in the name of the Location, or uses the driver's own auto for location organized group transportation and as otherwise required by the Location. This application and required attachments must be faxed to 484-445-7112 or emailed to DriverAuthorizationsAOP@portercurtis.com. The required attachments follow: (1) Motor Vehicle Report Authorization; (2) copy of driver's license and for school bus drivers only a valid medical certificate and S endorsement certification; (3) copy of signed Motor Vehicle Use Policy Acknowledgment; (4) copy of passing Defensive Driver Training quiz; and (5) medical certification if driver is age 75 or older.

² Select if passengers are strictly limited to employees or adult volunteers, unless exception is not allowed by the Location.

³ Bus means motor vehicle originally designed to transport 16 or more passengers, including the driver.

⁴ "Major motor vehicle violation" means any violation for: (1) Driving when your driver's license is already suspended or revoked; (2) Driving while under the influence of drugs or alcohol; (3) Driving without lights to avoid detection; (4) Failure to comply with a railroad crossing gate or barrier; (5) Failure to stop for a school bus with its red lights flashing and stop arm extended; (6) Failure to stop when you are driving a vehicle involved in a crash (hit-and-run offense); (7) Felony involving a vehicle; (8) Fleeing from a police officer; (9) Homicide by vehicle; (10) Racing on highways; (11) Reckless driving; or (12) Speeding 31 mph or more over the limit.