

University Corporate Insurance New Drivers of University Vehicles

The following information is required for all new drivers of University vehicles. The University self-insures for collision/comprehensive and requires this information to determine whether individuals are eligible to drive university vehicles. Please complete the following and return it to the Corporate Insurance office by emailing pacton@uwo.ca. (If you have any questions about the collection, use or disclosure of this information, please contact the Corporate Insurance Administrator at 519-661-2111 ext.)

The following department,	
requests that the person named below be added to our list of university drivers.	

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Driver Information:

Name:			
Home Address:	_ City:		
Driver¶ License Number:			
How long have you been licensed to drive?			
Have you had an accident in the last 6 years?			
Have you had any driving convictions in the last 6 years?			
Are you presently insured on other automobile insurance policies? Yes No			
(Answer only if driving a truck or towing trailer)			
What experience do you have driving this kind of vehicle?			
Driver signature: Dat	e:		
Department Approval Name (Please Print) Department	ent Approval Signature		

Note: The University provides our Insurance Broker with a list of all university drivers.