

UNIVERSITY OF CALIFORNIA, BERKELEY

Centralized Driver Record Monitoring Program

Driving Records Request Application

I am requesting driving records for the listed driver. I understand this procedure is in accordance with University policy Business and Finance Bulletin BUS-46 which relates to duties associated with driving a University Vehicle.

INSTRUCTIONS

Fax completed forms to Fleet Services **secure fax line** at 510-643-7917. Please note that driver's license numbers are considered protected data and should **NOT** be transmitted by email or other insecure methods.

Driver Type- Check which applies and complete the indicated release form

All drivers must be age 18 or older. For more information on driver type and appropriate forms to fill, please see [chart](#) for details
Enrollment Required

Regulated Driver*
(Release for Regulated Drivers)

Occupational Driver*
(INF-1101 (or) Out -of- State Release Form)

Frequent Driver*
(INF-1101 (or) Out -of- State Release Form)

Foreign License- Consult with Fleet Services

Short- Term Driver- **High Frequency**:
(Release for Snapshot Records)

Short- Term Driver- **Low-Frequency**:
(Release for Snapshot Records)

Infrequent Driver:
(INF-1101 Release Form only if driver is enrolled in the program)

I. DRIVER INFORMATION

Last Name _____

First Name _____

Department _____

Scheduled End Date _____

Chartstring: _____

II. DRIVER DATA COORDINATOR INFORMATION

Last Name _____

First Name _____

Department _____

Signature: _____ Date: _____

Signature acknowledges that reports received under this program are strictly confidential and must be safeguarded in a secure manner

III. AUTHORIZATION (Department Head/MSO)

Last Name _____ First Name _____ Phone No. _____

Signature: _____ Date: _____

Signatures authorizes enrollment