## STUDENT AUTHORIZATION TO OPERATE PRIVATELY OWNED VEHICLE

Student Name:		Driver's License #
Student ID #		State Exp Date
Course/Organization		Vehicle License #
Program/Activity		Make/Model
Destination		Registered Owner
Departure Date/Time		Insurance Provider
Return Date/Time		Insurance Policy #
Passe	engers	
****	Certification  I hereby certify that, whenever I drive a affiliated event, I will have a valid driver' vehicle will wear safety belts, and the veha. Covered for liability insurance for (\$15,000 for personal injury to, o death of, two or more persons in b. Equipped with safety belts in ope c. To the best of my knowledge, the required by law and adequate for I further certify that I have no outstandin I further certify that while using a private I will report all accidents to the CSU Hay 270 will be completed and filed within 48	r the minimum amount prescribed by State Law or death of one person; \$30,000 for injury to, or one accident; \$5000 property damage). The vehicle is in safe mechanical condition as the work to be performed. The traffic warrants. The ely owned vehicle on University-affiliated business the work Motor Pool (510/885-3074) and form Std.
2.	Approval Proof of insurance has been verified and is approved.	use of privately owned vehicle on State business  Date
	(Signature & Title)	Date
3.	Student POV Operator	
		Date
	(Signature)	

(RM50)