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| Agency Number: | Agency Name: |
| Driver Name: | Position Number: |
| Initial Assessment?  Yes  No | DL State and Number: |
| **QUESTION** | **ANSWER** |
| 1. What is the type of driver?   For other permitted driver, see [OAR 125-155-0400](http://arcweb.sos.state.or.us/pages/rules/oars_100/oar_125/125_155.html). | Employee  Volunteer  Agent  Other permitted driver (Describe) |
| 1. What is the official state business that requires driving? | Describe duties and include classification: |
| 1. What is the vehicle use assignment? | Day Use  Full-time Use  Overnight Use |
| 1. Is driving an essential function of the position? | Yes  No |
| 1. Does employee meet state driver requirements per [OAR 125-155-0200(1)](http://arcweb.sos.state.or.us/pages/rules/oars_100/oar_125/125_155.html)? | Yes  No 18 years or older  Yes  No Current valid driver’s license |
| 1. Does the employee meet the agency’s criteria for having an acceptable driving record/license? | Yes  No Details |
| 1. What is the driver’s license status?   See [ORS 807.120](https://www.oregonlegislature.gov/bills_laws/ors/ors807.html)  If answer is Yes, Valid with no restrictions, skip to #9.  **Note:** Hardship Permits are not included in “Other court-ordered restrictions”. See question #9 below. | Yes  No Valid with no restrictions  Yes  No Valid with restrictions  Describe restrictions:  Yes  No Suspended  Yes  No Revoked |

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| 1. If “**Valid with restrictions**” (#7 above) is “Yes”, how will the driver operate a vehicle within those restrictions to do state business? | Describe: |
| 1. Has the employee received any citations or warnings in the last three years according to their driving record? (Attach records.) If driver has received citizen complaints or been involved in accidents with state vehicle(s), describe them in “Other”. See **Note** below.   **Note:** If your agency has a policy for checking driver licenses, use the established agency criteria for this consideration. See Guideline for Authorizing State Drivers to Operate a State Vehicle (#[VUAT 1D](https://www.oregon.gov/das/Risk/Documents/VUAT1D_AuthDrvrStds%26Trng.pdf)) for details. | No major traffic offenses:  Yes Reckless driving  Yes DUII  Yes Failing to perform duties of a driver  Yes Criminal driving while suspended or revoked  Yes Fleeing or attempting to elude a police officer  Yes Other, describe:  Yes  No Felony revocation of driving privileges  Yes  No Felony driver license suspension  Yes  No Misdemeanor driver license suspension  Yes  No Moving traffic violations  Yes  No Careless driving conviction  Yes  No Class A moving traffic infraction |
| 1. If license is suspended or revoked, is the driver requesting—or do they have—a hardship permit?   See [ORS 807.240](https://www.oregonlegislature.gov/bills_laws/ors/ors807.html). | Yes  No  If “Yes”, go to Hardship Permit Risk Assessment  (Toolkit #VUAT-2B) |
| 1. Does the driver have an ignition interlock device (IID) installation requirement?   If “No” to both, skip to question #13. | Yes  No As part of a DUII diversion agreement  Yes  No As part of DUII Conviction  Describe: |
| 1. Has the agency completed an Employer Ignition Interlock Device (IID) Exception (DMV 735-6874)?   See [ORS 813.602](https://www.oregonlegislature.gov/bills_laws/ors/ors813.html). | Yes  No  **Note**: If “Yes”, when the agency completes an Exception and subsequently decides not to allow the employee to drive or if the employee has their driver’s license reinstated or leaves the agency, the “Notification of Termination of Exception” section of the Exception form must be completed and sent to DMV. |
| 1. Is the driver scheduled to attend all state/agency required driver training? Check with supervisor for scheduling. | Yes  No Driving on State Business Orientation  (Webinar)  Yes  No Agency required driver safety training |
| 1. **Agency Decision**   Based on an assessment of the above information, the agency decision to allow the named driver to operate a motor vehicle to carry out official state business is :  Approved  Denied [If denied, please indicate below which answer(s) contributed to the denial:] | |
| Date Completed |  |
| Printed Name of Appointing Authority or Designee |  |
| Signature of Appointing Authority or Designee |  |