



CHICO STATE

SPORT CLUBS

A Program of Recreational Sports

Club Driver Packet

NAME OF DRIVER: _____ CHICO STATE ID#: _____

PERSONAL EMAIL: _____ CLUB: _____

New Drivers:

STEP 1: Print and Complete this entire packet

STEP 2: You must complete a defensive driver's training course.

- Follow this link -
<https://ds.calstate.edu/?svc=sumtotal>
- Complete the training and screenshot your completed view
- Upload screen shot to your registration

STEP 3: READ EACH PAGE THOROUGHLY!

INCOMPLETE PAGES WILL BE RETURNED, ALONG WITH THE ENTIRE DRIVER

PACKET! If you have any questions please email sportclubtravel@csuchico.edu

STEP 4: TURN IN COMPLETED PACKET TO YOUR CLUB TRIP LEADER.

STEP 5: CHECK EMAIL REGULARLY to electronically sign volunteer form and Limited Reporter of Child Abuse Form

Returning Drivers:

STEP 1: Print and complete pages 1-6 of the Club Driver Packet. Your defensive driver training verification is already on file.

STEP 2: READ EACH PAGE THOROUGHLY!

INCOMPLETE PAGES WILL BE RETURNED, ALONG WITH THE ENTIRE DRIVER

PACKET! If you have any questions, please email sportclubtravel@csuchico.edu

STEP 3: TURN IN COMPLETED PACKET TO YOUR CLUB TRIP LEADER.

CAUTION: YOU MUST HAVE A VALID CALIFORNIA DRIVER'S LICENSE AND BE 18 OR OLDER IN ORDER TO BECOME AN ELIGIBLE DRIVER!

NOTE: Insurance card must be carried on you at all times when driving on behalf of the university

OFFICE USE ONLY

Driver's Training Completed: _____ FA or SP YEAR: _____

Date Received: ____/____/____ Received by (staff initials): _____



Last Name First Name Middle Initial Date of Birth* (mm/dd/yyyy) Chico State ID

*Minors < 18 - [Parent Consent](#) form must be attached

Street Address City State Zip Home Phone Number

*Identity and Access Management (IAM) email address must be a personal email address (may not end in csuchico.edu). This address is used during account initialization and may be used when prompted for password recovery.

Personal Email Address (must be non-campus)*

Emergency Contact Name

Emergency Contact Phone Number

Department

Department ID

Person of Interest Type

Start Date mm/dd/yyyy

End Date mm/dd/yyyy

Lead/Manager Name

Send completed form to POI-Request using Submit Form button or send to poirequests@csuchico.edu. Form will be reviewed and routed for electronic signatures along with [Limited Mandated Reporter CANRA Form](#) which is required with each volunteer appointment.

Assignment & Summary of Detailed Duties (Please be specific)

Do activities listed above include teaching or assistant teaching? ☐ Yes* ☐ No *If yes is volunteer instructor of record? ☐

Are you currently a CSU, Chico Employee? ☐ Yes ☐ No

If yes, please provide the following:

Position

Department

Time Base

Does the volunteer need access to campus services? ☐ Yes ☐ No

(e.g. campus email, Box access, [facility/physical access](#) etc.) The campus [Entitlement Catalog](#) under NonMember includes a list of services available to volunteers if needed.

Are you volunteering in a field that requires a license* or certificate? ☐ Yes ☐ No If yes, attach copy of valid license or certificate. *Class C driver's license not required to be attached.

Background check required? ([See Guidelines](#)) ☐ Yes ☐ No If yes, volunteer may not begin work until clearance obtained from HRSC or OAPL.

Are you driving on behalf of the University? ☐ Yes ☐ No If yes, volunteer may not begin work until [Defensive Driving Training](#) has been completed.

Appropriate Administrator Signature

Date

This is to acknowledge that I am volunteering my service, performing duties to those listed above and that services rendered by me will be at the direction of the above named lead/manager. I will not be compensated for these services. Further, I understand that I serve at the pleasure of my lead/manager.

Volunteer Signature

Date

I have verified that volunteer is not a current Faculty or Staff CSU, Chico Employee.

HRIS Representative Signature

Date

Volunteer is a current CSU, Chico State Employee or is performing teaching duties. I have verified that the duties being performed by this volunteer are different in nature than their compensated employment(s) and are appropriate.

HR Manager / Academic Personnel

Date

For OAPL Use Only

POI Faculty Volunteer 00106 ☐

Background check cleared ☐

**STATEMENT ACKNOWLEDGING REQUIREMENT
TO REPORT CHILD ABUSE AND NEGLECT
[USE FOR LIMITED REPORTERS ONLY]**

INSTRUCTIONS FOR HUMAN RESOURCES: Provide this form, as well as Attachments A and B of Executive Order 1083, to employees who are identified as Limited Reporters*. Retain the completed form in the employee's official personnel file.

*Exception: Non-Management Personnel Plan employees hired prior to January 1, 1985

California law requires certain people, known as "Mandated Reporters," to report known or suspected child abuse or neglect. You have been identified as a certain type of Mandated Reporter: a Limited Reporter under Penal Code § 11165.7(a)(41). As a Mandated Reporter, you are required by the law to sign this statement acknowledging your legal reporting obligations.

A copy of the relevant provisions of the law explaining the definition of "Mandated Reporter" (Penal Code § 11165.7), the reporting obligations (Penal Code § 11166), penalty for failure to report abuse or impeding report (Penal Code § 11166.01), the contents of the reports, and the confidentiality of the Mandated Reporter's identity (Penal Code § 11167) is attached.

Online training is available to you at the [Learning Management System](#) (under keyword search "Mandated Reporter").

While it is not required, we strongly encourage you to take the training.

WHEN REPORTING ABUSE IS REQUIRED

As a Limited Reporter, whenever in your professional capacity or within the scope of your employment you have knowledge of or observe a person under the age of 18 years whom you know or reasonably suspect has been the victim of child abuse or neglect ***on CSU premises or at an official activity of, or program conducted by, the CSU***, you must report the suspected incident (Penal Code §§ 11166(a) and 11165.7(a)(41)).

PROCEDURE FOR REPORTING

To make a report, you **must** do the following:

- ***Immediately, or as soon as practically possible***, contact by phone one of the following: police or sheriff's department (including campus police but not including a school district police or security department); a county probation department (if designated by the county to receive mandated reports); or the county welfare department (Child Protective Services or CPS).
- ***Within 36 hours of receiving the information concerning the incident***: complete Form SS 8572 (included as Attachment E; [Form SS 8572](#) and [instructions for completing the form](#) are also available at the State of California Department of Justice website); and send, fax or electronically transmit it to the agency that was contacted by phone (Penal Code § 11166(a)).

Names and contact information for agencies that can accept reports are available online at the following hyperlinks:

- [California State University Police Departments \(by campus\)](#)
- [Child Protective Services \(by county\)](#)
- [Sheriffs' Departments \(by county\)](#)

Note: Reporting to a supervisor, a coworker, or other person is not a substitute for making a mandated report to one of the agencies listed above.

ABUSE AND NEGLECT THAT MUST BE REPORTED

Physical abuse, meaning physical injury other than by accidental means inflicted on a child (Penal Code § 11165.6).

Sexual assault, including sex acts with a child, intentional masturbation in the presence of a child, child molestation, and lewd or lascivious acts with a child under 14 years of age or with a child under 16 years of age if the other person is at least ten years older than the child (Penal Code § 11165.1(a)(b)).

Sexual exploitation, including acts relating to child pornography, child prostitution, or performances involving obscene sexual conduct by a child (Penal Code § 11165.1(c)).

Statutory rape involving sexual intercourse between a child under 16 years of age and a person 21 years of age or older, which is also a form of “sexual assault” (Penal Code § 11165.1(a)).

Neglect, meaning the negligent treatment or maltreatment of a child by a parent, guardian or caretaker under circumstances indicating harm or threatened harm to the child’s health or welfare (Penal Code § 11165.2).

Willful harming or injuring or endangering a child, meaning a situation in which any person inflicts, or willfully causes or permits a child to suffer, unjustifiable physical pain or mental suffering, or causes or permits a child to be placed in a situation in which the child or child’s health is endangered (Penal Code § 11165.3).

Unlawful corporal punishment, meaning a situation in which any person willfully inflicts upon a child cruel or inhuman corporal punishment or a physical injury (Penal Code § 11165.4).

WHAT IS NOT CHILD ABUSE OR NEGLECT?

The law does **not** consider the following child abuse or neglect for reporting purposes:

- Injuries caused by two children fighting during a mutual altercation (Penal Code § 11165.6)
- Voluntary sex acts, if there are no indicators of abuse, unless that conduct is between a person who is 21 years of age or older and a minor who is under 16 years of age (Penal Code § 11165.1(a))
- An injury caused by reasonable and necessary force used by a peace officer acting within the course and scope of his or her employment (Penal Code § 11165.6)
- Reasonable and necessary force used by public school officials to quell a disturbance threatening physical injury to person or damage to property, for self-defense, or to obtain possession of weapons or other dangerous objects under a child’s control (Penal Code § 11165.4)
- Corporal punishment, unless it is cruel or inhumane or willfully inflicts a physical injury (Penal Code § 11165.4)

- Not receiving medical treatment for religious reasons (Penal Code § 11165.2(b))
- Acts performed for a valid medical purpose (Penal Code § 11165.1(b)(3))
- An informed and appropriate medical decision made by a parent or parent, guardian or caretaker after consultation with a physician who has examined the child (Penal Code § 11165.2(b))

IMMUNITY AND CONFIDENTIALITY OF REPORTER

Mandated Reporters cannot be held civilly or criminally liable for their reports. Instead, they enjoy immunity from prosecution for their reporting of suspected child abuse (Penal Code § 11172(a)). Both the identity of the person who reports and the report itself are confidential and disclosed only among appropriate agencies (Penal Code § 11167(d)).

PENALTY FOR FAILURE TO REPORT ABUSE OR IMPEDING REPORT

A Mandated Reporter who fails to make a required report of abuse, or any administrator or supervisor who impedes or inhibits a report, is guilty of a misdemeanor punishable by up to six months in jail, a fine of \$1,000, or both (Penal Code Section 11166(c) and Section 11166.01(a)). Where the abuse results in death or great bodily injury, the Mandated Reporter who fails to make a required report or administrator or supervisor who impeded or inhibited the report is subject to punishment of up to one year in jail, a fine of \$5,000, or both (Penal Code Section 11166.01(b)).

ACKNOWLEDGMENT

I acknowledge being provided with copies of Penal Code Sections 11165.7, 11166, 11166.01, and 11167. I acknowledge and understand my responsibility and legal obligation to report known or suspected child abuse or neglect in compliance with Penal Code Section 11166.

Employee or Volunteer Name: Chico State ID Dept.:

Signature: Date:

**AUTHORIZATION TO USE PRIVATELY OWNED
VEHICLES ON STATE BUSINESS**

STD. 261 (REV. 3-95)

*This approval must be renewed annually.**Supervisor: Retain Original Copy***I. CERTIFICATION**

In accordance with State Policy (*S.A.M. 0753 & 0754*) approval is requested to use privately owned vehicles to conduct official State business.

I hereby certify that, whenever I drive a privately owned vehicle on State business, I will have a valid driver's license and proof of liability insurance in my possession, all persons in the vehicle will wear safety belts and the vehicle shall always be:

1. Covered by liability insurance for the minimum amount prescribed by State Law (\$15,000 for personal injury to, or death of one person; \$30,000 for injury to, or death of, two or more persons in one accident; \$5,000 property damage). Vehicle Code Section 16020 (effective July 1, 1985) requires all motorists to carry evidence of current automobile liability insurance in their vehicle.
2. Adequate for the work to be performed.
3. Equipped with safety belts in operating condition.
4. To the best of my knowledge, in safe mechanical condition as required by law.

I understand that the mileage rate I claim is full reimbursement for the cost of operating the vehicle, including fuel, maintenance, repairs and both liability and comprehensive insurance.

I further certify that, while using a privately owned vehicle on official State business, all accidents will be reported on form STD. 270 within 48 hours (*S.A.M. 2441*).

I understand that permission to drive a privately owned vehicle on State business is a privilege which may be suspended or revoked at any time.

DRIVER'S LICENSE NUMBER	STATE	EXPIRATION DATE
EMPLOYEE'S SIGNATURE	PRINT NAME	DATE SIGNED

II. APPROVAL

<i>Use of a privately owned vehicle on State business is approved.</i>			
APPROVING AUTHORITY SIGNATURE	TITLE	DATE APPROVED	

III. RENEWAL

<i>I have reviewed the above certification and approval and certify that the information provided is correct and valid.</i>		
EMPLOYEE'S SIGNATURE	APPROVING AUTHORITY SIGNATURE	DATE APPROVED
<i>I have reviewed the above certification and approval and certify that the information provided is correct and valid.</i>		
EMPLOYEE'S SIGNATURE	APPROVING AUTHORITY SIGNATURE	DATE APPROVED
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EMPLOYEE'S SIGNATURE	APPROVING AUTHORITY SIGNATURE	DATE APPROVED



Department of Environmental Health & Safety
PARK 2 – Zip 019 – Telephone: 898-5126
California State University, Chico

Please fill out all information requested. All information is confidential.

Name: First, Middle Initial, Last	PLEASE WRITE YOUR FULL NAME AS IT APPEARS ON YOUR <u>DRIVER'S LICENSE</u>
Employee or Student ID Number	
Phone Number (Department or personal number)	
Department (Department Driving for)	Sport Clubs - Recreational Sports
Department Zip	767
Status (Faculty, Staff, Student, Foundation, A.S., or Volunteer Employee) <i>If student or Volunteer Employee, please state why you are taking Defensive Driver Training.</i>	Reason: to travel for sport clubs on competitions Volunteer Student or Employee
CA Driver's License Number (If you have a license in another State, please put State and License No.)	
CDL Expiration Date	

Information below ONLY for drivers who are required to have a Commercial License for their employment (bus drivers, heavy equipment operators)

Other Licenses (Class A, B, etc.)	
Date of Medical (Month, Date, Year)	
Expires	

I have received and read the "Rules and Regulations Governing the Use of Vehicles at CSU, Chico" and "Use of University and Private Vehicles" for the Campus. **INITIALS:** _____

I am in possession of a valid California or other State driver's license. I certify that I have not been issued more than three moving violations or have been responsible for more than three accidents (or any combination of more than three thereof) during the past twelve month period.

SIGNATURE: _____ **DATE:** _____

DRIVING RECORD: When driving records raise doubt as to a person's ability to drive safely, permission to drive on University and State business should be declined. When a person has been involved in accidents or has received traffic citations in such numbers or of such gravity as to be a matter of concern, his/her driving record must be obtained from the Department of Motor Vehicles for re-evaluation. Similar action must be taken if there are other indications of driving problems and/or the control office concludes that the driver should be re-examined. Continuation of authority to drive on University or State business depends upon evaluation of the report from the Department of Motor Vehicles.

	CSU, Chico Level 1 - Confidential
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AUTHORIZATION FOR RELEASE OF DRIVER RECORD INFORMATION

I, _____, California Driver License Number, _____
hereby authorize the California Department of Motor Vehicles (DMV) to disclose or
otherwise make available, my driving record, to my employer, California State University,
Chico.

I am not driving in a capacity that requires mandatory enrollment in the Employer Pull
Notice (EPN) program pursuant to California Vehicle Code (CVC) Section 1808.1 (k). I
understand that my driving record is being requested by California State University, Chico
in an effort to promote driver safety, to meet University and California State requirements,
and to determine my eligibility to drive a University Vehicle.

EXECUTED AT:	CITY	COUNTY	STATE
	CHICO	BUTTE	CA
DATE	SIGNATURE OF DRIVER		

I, Mike Thorpe, of California State University, Chico, do hereby certify under penalty of
perjury under the laws in the State of California, that I am an authorized representative
of California State University, Chico, that the information entered on this document is
true and correct, to the best of my knowledge and that I am requesting driver record
information on the above individual to verify the information as provided by said individual.
This record is to be used by California State University, Chico in the normal course of
business and as a legitimate business need to verify information relating to a driving
position not mandated pursuant to CVC Section 1808.1. The information received will not
be used for any unlawful purpose. I understand that if I have provided false information, I
may be subject to prosecution for perjury (Penal Code Section 118) and false
representation (CVC Section 1808.45). These are punishable by a fine not exceeding five
thousand dollars (\$5,000) or by imprisonment in the county jail not exceeding one year, or
both fine and imprisonment. I understand and acknowledge that any failure to maintain
confidentiality is both civilly and criminally punishable pursuant to CVC Sections 1808.45
and 1808.46.

EXECUTED AT:	CITY	COUNTY	STATE
	Chico	Butte	CA
	SIGNATURE OF REQUESTER		
November 2, 2011			

Safe Driving for Sport Club Trips: Getting you there safely

KEEP THIS PAGE FOR YOUR OWN RECORDS

A car that can get you around town in short trips won't necessarily do long trips.

❖ Safe Car

- Headlights, tail lights, brake lights, turn signals, wipers & washers
- Reliable engine and brakes
- Day before every trip: engine oil, brake fluid, coolant, trans fluid
- Tire air pressure (tires lose 1 pound/month)
- Tires not too worn, and spare tire & tools in trunk
- Gas tank full

❖ Safe Driving

- Sufficient sleep prior night
- Absolutely no alcohol or drugs, including prior evening
 - Lives could be lost and ruined if a driver is influenced by drugs
 - Don't allow your denial to ruin another person's life
- Front Seat: driver and navigator
 - Navigator's job is to assist with directions, etc
- Keep music low (Your music does NOT have to fill the entire area!)
- No stunts or horseplay while driving
- Know whom you will call if you have problems
 - Have the number in your cell or written down
 - 911

❖ Getting There

- No caravanning
- Every vehicle has map and directions
- Leave on time to avoid speeding
- If you independently decide to carpool:
 - Make your insurance verification available to riders
 - Riders, don't be afraid to ask for verification of insurance
 - Do not overcrowd the vehicle
 - Everyone wear seatbelts

❖ Auto Insurance

- Liability
 - Bodily injury (Recommend \$100K/person, 300K/accident)
- Medical (driver & passengers recommend \$2K)
 - Discuss the reality of medical costs today
- Physical damage
 - Comprehensive (whatever you want)
 - Collision (whatever you want)

❖ If an accident happens

- Take care of life and injury first
- Work with local law enforcement
- Call 911 to report incident
- Immediately write down statements and take photos
 - Get other driver's information, etc

Important Driver Information

KEEP THIS PAGE FOR YOUR OWN RECORDS

- ❖ Drivers must have a valid California Driver's License
- ❖ **Drivers must be 18 years or older to drive CSU owned vehicles, but must be 21 or older to drive CSU approved rental vehicles on university approved trips. Driver must be 18 years or older to drive personal vehicles, with or without passengers.**
- ❖ Drivers must ensure that there are no minors present in their vehicles
- ❖ Drivers driving vehicles capable of transporting 12 or fewer persons, including the driver, may use a regular California Driver's License. A vehicle carrying more than 12 persons may require a Class C or passenger endorsement. Under no circumstances should a 15 passenger can be used.
- ❖ Drivers driving personal vehicles must have at least the minimum automobile liability insurance coverage required by the state.
- ❖ Unless prior approval is obtained from the Trip Administrator, **total daily driving distance must not exceed 800 miles regardless of the number of approved drivers.**
- ❖ Unless prior approval is obtained from the Trip Administrator, **two approved drivers are required for each vehicle for trips over 400 miles in one direction.**
- ❖ No single driver may drive more than 150 miles without taking a mandatory minimum 15-minute break.
- ❖ **Unless prior approval is given by the Trip Administrator, no travel can occur between midnight and 6:00am.**
- ❖ Drivers should not operate a vehicle while using alcohol and or drugs, or while taking prescription medications which impair one's ability to drive.
- ❖ Drivers are expected to obey all traffic laws including driving at or below the posted speed limit, or at a safe speed based on the conditions.
- ❖ Drivers must refrain from distracting behaviors while driving, eating, and drinking, cell phone use, adjusting radio channels, etc.
- ❖ ALL travelers must wear seat belts. Number of passengers must not exceed number of operational seatbelts.
- ❖ In the event of a motor vehicle accident, the driver must assist in filling out Vehicle Accident Form and Auto Accident Information Exchange Form, see appendices.
- ❖ **Drivers' Training Requirement:** In accordance with State policy (S.A.M. 0751) operators of vehicles on official business must have a valid California Driver's License, insurance, and a good driving record. To be a driver on a team trip, operators must complete a Defensive Drivers' Training course before they may drive to or from a team trip. For information regarding this procedure and for information on Defensive Driver Training courses, please the Trip Administrator