



San Mateo County Community College District

Motor Vehicle Safety Inspections

Driver responsibilities: The vehicle driver shall complete a visual inspection, note any concerns and sign the inspection form *prior to departing District property*. In the event the driver identifies any potentially hazardous conditions prior to departure, the driver is to request an alternate vehicle. In the event the driver identifies any non-hazardous conditions that can be addressed at a later time, the driver shall complete the tear-out Vehicle Service Request Form and submit to their division office along with vehicle keys at the conclusion of their trip.

Division and Facilities Responsibilities: The Division Dean / Department Director who is responsible for distributing vehicle keys will conduct periodic checks to insure drivers are completing the pre-trip safety inspections and signing the inspection report. The Division Dean / Department Director will address any non-conformances with individual drivers, implementing progressive discipline as appropriate. The Division Dean / Department Director, or their delegate, will insure that any vehicle problems reported via the Vehicle Service Request Form are documented via entry of a Facilities Work Request. If Facilities is unable to perform needed service or repairs, the Facility Manager will facilitate completion of the service / repairs with a licensed repair facility.

The Facilities Department, under the direction of the Chief Engineer, will create Facilities Work Requests to schedule regular (at least quarterly) visual inspections by the Facilities Department. The Chief Engineer will also enter Facility Work Requests as a reminder to the Divisions responsible for each vehicle to have factory recommended service inspections and/or maintenance performed at a licensed repair facility. Vehicles with reported deficiencies should not be put into service until certified by a licensed repair facility.

My signature below indicates that I have read and understand the document titled "Motor Vehicles Operation and Safety Guidelines" for the San Mateo County Community College District and agree to follow the stated guidelines.

Printed Name

Signature

Date

File



I certify that I have received and viewed the SMCCCD Driving Safety CD. I certify that I will be a driver of a SMCCCD ~~12~~ passenger van for a school related event.

10

I certify that I have submitted a copy of my driver's license, a copy of my auto insurance and/or a DMV Pull Record to the Physical Education/Athletics/Dance Division at Skyline College.

I will return the van key to the Physical Education/Athletics/Dance Division .

Name: _____

Signature: _____

Date: _____

Division/Program: _____

For Occasional Van Users Only.

Please answer the following questions below:

Event Date: _____

Destination: _____