



State of Washington  
**BASIC DRIVING SAFETY PROGRAM - RECERTIFICATION**  
**VALID LICENSE TO DRIVE AND DRIVING EXPERIENCE STATEMENT**

**Enterprise Services Policy 12.20.15 Basic Driving Safety Program Requirements**

The basic driving safety program requirements are applicable to all state drivers authorized by the agency to operate a state or privately owned motor vehicle for use on official state business, regardless of frequency of driving.

**Enterprise Services Policy 12.30.30.a Basic Insurance Requirements for Using Privately Owned Motor Vehicles for Official State Business**

When driving privately owned vehicles (POVs) on official state business, state drivers are to comply with the state of Washington's liability insurance laws, chapters 46.29 and 46.30 RCW. If an accident occurs when the state driver is operating a POV, the state driver's personal automobile insurance is primary and will be utilized prior to any possible provision of the state's excess liability protection. Insurance deductibles are the **responsibility of the POV driver and are not reimbursable by the state.**

*In an effort to promote safe driving practices for the protection of state employees, students, and the citizens and drivers in Washington state, all drivers are required to sign this statement verifying: (1) they possess a valid Washington State (or out-of-state) license that is current and reflects information consistent with the applicable state licensing department records, and (2) they agree to advise the appropriate supervisor or manager by the next business day if their legal status to drive changes.*

**Supervisor Verification Checklist**

1. **Complete License Check/Verification:** Visually check to ensure anyone assigned or authorized by the agency to drive has in their possession and can present a valid Washington or out-of-state driver's license. A visual check will include verification that: (1) license has not expired and (2) photo matches person.

Verification                      Expiration Date: \_\_\_\_\_

2. **Provide Proof of Insurance:** Verify driver has valid vehicle liability insurance coverage.

Verification                      Expiration Date: \_\_\_\_\_

3. **Have Employee Answer Questions Below and Sign:** After verification of a *valid* license, have potential driver answer the questions below and verify the accuracy of their responses by signing at the bottom of the form. *Note: Drivers who mark "no/don't agree" in any box below, shall not be considered for driver assignments. The above process and completion of this form can be repeated when a potential driver can verify by signature yes/agree responses to the questions below.*

4. **Provide Documentation:** Maintain a copy of this completed form in appropriate agency files.  
*Completion of Items 1-4*

**Supervisor Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Basic State Driver Responsibilities**

Anyone authorized to drive a vehicle for a state agency, university or community/technical college is required to fill in the box below by placing a check in response to each statement, and signing and dating to verify.

I have a valid Washington State (or out-of-state) license that is current and reflects information consistent with the applicable state licensing department records.                      Yes                      No  
As a condition of driving a vehicle for state business, I agree to inform my supervisor by the next business day if my status to legally drive changes at any time.                      Agree                      Don't Agree  
As a condition of driving a vehicle for state business, I agree to inform my supervisor by the next business day if my vehicle liability insurance coverage ceases.                      Agree                      Don't Agree

**Driver's Name (print):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Current Driver's Safety Training Card #** \_\_\_\_\_

**Driver's Signature:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Supervisor (print):** \_\_\_\_\_ **Mail Stop:** \_\_\_\_\_