



BE SMART DRIVE SAFE

One growing area of liability exposure within the Catholic Church is related to driving and transportation activities. In an effort to reduce this exposure, the Diocese of Joliet requires all individuals who drive for the Church to take a defensive driving course prior to performing any driving duties. The following course takes less than 20 minutes to complete and training is free. As an added bonus, you may even be able to receive a discount on your personal auto insurance coverage.

Thank you for helping us with our transportation needs!

To begin the course:

- Go to www.cmgedrivesafe.com
- A link to the course can also be found on Catholic Mutual's website at www.catholicmutual.org. Scroll to bottom of main page and click on Be Smart-Drive Safe, located in box titled Risk Management/Defensive Driving.
- Select English or Spanish
- Enter your information in the boxes provided.

In the last information box “*Email My Results To*”, please enter the following email address(es):

jwright@catholicmutual.org

- Click “Continue”
- After watching the video program, click the “Continue” button and answer the certification questions
- Click “Finish”
- Your training results will be emailed automatically. You will also receive an Email confirmation that you have completed the course.

If you experience any trouble viewing the course, please contact OPUS at (913) 825-1600 or email help@opustraining.com. They will be happy to assist you.



101 W. Airport Road, Romeoville, IL 60446

DRIVER INFORMATION SHEET

Name _____ Date of Birth _____
 Address _____ Home Phone # _____
 _____ Cell Phone # _____
 Driver's License # _____ Expiration Date _____

Vehicle That Will Be Used (complete only if using personal vehicle)

Name of Owner _____ Model of Vehicle _____
 Address of Owner _____ Make of Vehicle _____
 _____ Year of Vehicle _____
 License Plate # _____ Expiration Date _____
 Registration Expiration Date _____

If more than one vehicle is to be used, the aforementioned information must be provided for each vehicle.

Insurance Information (complete only if using personal vehicle)

When using a privately-owned vehicle, the insurance coverage is the limit of the insurance policy covering that specific vehicle.

Insurance Company _____ Policy # _____
 Date or Policy Expiration _____ Liability Limits of Policy* _____

(*Please note: The minimal, acceptable liability limit for privately-owned vehicles is \$100,000/\$300,000)

Please be aware when using a personal vehicle, your insurance is primary. There is a policy that would offer additional liability protection should a claim exceed the limits of your policy.

Driving History

Have you had any of the following citations or convictions in the past THREE years:

	Yes	No
Driving under the influence of alcohol or drugs	_____	_____
Hit and run	_____	_____
Failure to report an accident	_____	_____
Negligent homicide arising out of the use of a motor vehicle	_____	_____
Using a motor vehicle for the commission of a felony	_____	_____
Permitting an unlicensed person to drive	_____	_____
Reckless driving	_____	_____
Are you currently taking any medication that may affect your driving?	_____	_____

I certify that the information given on this form is true and correct to the best of my knowledge. I understand that as a driver, I must be 21 years of age or older, possess a valid driver's license, have the proper and current license and, if driving a personal vehicle, have current vehicle registration and the required insurance coverage in effect on the vehicle. I agree that I will refrain from using a cell phone or any other electronic device while driving.

Driver's Signature _____ **Date** _____