



City of Houston

DRIVER DISQUALIFICATION EXEMPTION APPLICATION

DATE: \_\_\_\_\_

DEPARTMENT/DIVISION: \_\_\_\_\_

DRIVER NAME/EMPLOYEE #: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_

The employee named above does not meet the driving qualifications as outlined in AP 2-2 (Motor Vehicle Assignment and Use). However, because this employee must drive a vehicle in order to perform their job duties, an exemption is being requested. The employee understands that the City of Houston only issues one driving exemption to an employee during the course of his/her employment with the City Houston, including any subsequent rehires.

The employee's driving record reflects the following issues: (specify the nature of the violations/accidents)

\_\_\_\_\_  
\_\_\_\_\_

The employee agrees that he/she will adhere to the terms of AP 2-2, state driving laws, will take all necessary steps/precautions to drive safely and will immediately notify their supervisor and the department of any additional violations/accidents occur. Furthermore, if the employee's driving disqualification is for an off-duty DUI/DWI, the employee agrees to enter into a Last Chance Agreement, as outlined in EO 1-12 (Amended Controlled Substance & Alcohol Abuse), and will abide by the terms of that agreement. Any violation of the Last Chance Agreement will terminate any driving rights provided by this exemption.

**If the employee fails to comply with this exemption, it will be immediately rescinded.**

By signing below, the employee agrees to comply with the terms listed above.

Employee signature: \_\_\_\_\_

Date of Exemption Request: \_\_\_\_\_

For Department Use Only	
This exemption is: approved _____ denied _____	
DEPARTMENT DIRECTOR: _____	
DATE EXEMPTION GRANTED: _____	
The employee will successfully complete the following training or other actions by the date(s) indicated:	
Training /Other Actions	Completion Date
_____	_____
_____	_____
_____	_____
_____	_____

cc: Employee

Human Resources