

School of Continuing Education
600 Lincoln Avenue Charleston,
IL 61920 800-446-8918

TO: Off-Campus Instructors

FROM: Pamela Collins
Director

RE: State Insurance Policy

Our office is required to have on file a copy of your driver's license and auto insurance card. In lieu of sending us copies, you may sign and return this form stating that you are a licensed driver and carry the minimum auto insurance required by law.

We must have this on file in order to comply with University policy and the laws of the State of Illinois. Please return this information prior to the Fall Semester.

I have a valid driver's license and have automobile insurance coverage.

Print name

Driver's license number

Signature

Date