

## MVR RELEASE AUTHORIZATION/DRIVER AGREEMENT

Revised 08/05/2010

## APPLICANT: COMPLETE THE FOLLOWING

- I. In connection with my application for, or renewal of, my Ferrum College Drivers Certification, I understand that a copy of information pertaining to my driving record will be requested. I understand that driving a Ferrum College vehicle is a privilege and responsibility granted to me upon successful completion of all requirements as defined in the College's Driver/Vehicle Safety policy, a copy of which I have received. I agree to abide by all of the rules and regulations cited under the Ferrum College Driver/Vehicle policy. I understand that a Ferrum College vehicle is defined as any motor vehicle owned or leased by Ferrum College and/or registered under the name of Ferrum College and/or any rental vehicle that is used for Ferrum College business with rental fees paid for by college funds.
- II. I acknowledge that a telephonic facsimile (FAX) or photographic copy of this Release Authorization shall be as valid as the original.
- III. I hereby authorize, without reservation, any law enforcement agency or screening/information service bureau contacted by Ferrum College or its agent, to furnish the information described in Section I.
- IV. I understand that by signing this release, I am authorizing Ferrum College to, on an ongoing basis, obtain information pertaining to my driving record. This ongoing authorization will remain in effect until such time as I, in writing, rescind this authorization or Ferrum College's policy relating to driving College-owned vehicles changes to such that it no longer requires such information. I agree to report any license suspensions immediately; accidents, offenses or any other condition to the Ferrum College Police Department immediately, (but no more than 3 days after conviction), that may affect my ability to drive a Ferrum College vehicle. I understand that continued eligibility to drive a Ferrum College vehicle is based on maintaining a satisfactory driving record, a valid and current DMV issued driver's license, and approved driver status.
- V. I understand that if granted a driving certification, I will only drive those vehicles on which I am approved. I will not drive a Ferrum College vehicle at any time prior to meeting the requirements in the above stated policy. I also agree to only drive Ferrum College vehicles for College-related purposes and/or events.

The following information is required by the DMV, law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes. I hereby release the employer and agents and all persons, agencies, and entities providing information or reports about me from any and all liability arising out of the requests for or release of any of the above mentioned information or reports.

Please print your full name	LAST	FIRST	MIDDLE	
Please print other names you have use	d .			
Home Address				
City		State	Zip Code	
Social Security Number		Date of Birth		
Driver's License Number		State Issuing License	:	
Name as it appears on license		Valid E-Mail Addres	ss	
Signature		Today's Date		