

Authorization to Obtain Driver Record and Verify Driver's License Status

As a member of the University of St. Thomas community (student, staff, or faculty) it is understood I may be required to drive a university owned or rented motor vehicle for university business.

I understand that both the University of St. Thomas and its insurance company require a legible photocopy (front and back) of my current driver's license to assess my driving record, driver's license status, and insurability.

I hereby authorize the University of St. Thomas and its insurance company and/or its agent to obtain necessary driver and motor vehicle record data to support this status check.

Date:	<input type="checkbox"/> Student	<input type="checkbox"/> Faculty	<input type="checkbox"/> Staff
Print Full Name:		Date of Birth:	
Signature:			
Driver's License Number:		State:	
Requesting Department:		Department Contact and Extension:	
<p>Notes: This status check good for one year from the above date, or if/when status changes. Requestor responsible for notifying requesting department contact and Auxiliary Services of changes to driving record or driver's license status prior to renewal date. Form shall be submitted for approval a minimum of ten (10) business days in advance of requirement to operate vehicle. Signature above indicates requestor has read and will abide by student and employee transportation policies.</p>			
<p>Photocopy the front and back of your driver's license in the space below and mail to: Angela Hasouris, Auxiliary Services, Mail #5049</p>			