



Driving Record Review Authorization Form

As a driver of a college-owned or rental vehicle, I understand that it is my responsibility to operate the vehicle in a safe manner and comply with all state driving regulations.

I understand that any traffic violations incurred while driving a College owned or rental vehicle are my responsibility and any associated fees will not be reimbursed by the college.

I understand my employer will periodically review my driving record to determine continued eligibility to drive a company vehicle or rental vehicle.

I authorize my employer, or its designated agent, to periodically review my driving record and obtain a driving record report. This authorization is valid as long as I am an employee or employee candidate of the College and may only be rescinded in writing.

Employee Name (*Printed*)

Driver's License Number

Employee Signature

Date

Employee Title & Department

Employee Email Address

Facility Management Review Signature

Date

To request a College-owned or rental vehicle, please complete and submit this Driving Record Review Authorization Form (if not already on file) with the Vehicle Request Form to:

Valerie Wenger | Facilities Operations Secretary | Damon Flowers Building, DF 117
vwenger@wccnet.edu | O: 734.677.5300 | F: 734.677.5475