

INDIVIDUAL DRIVER RECORD REQUEST AUTHORIZATION

I hereby authorize Goucher College or its insurance broker/company to obtain my individual driving record from my applicable state) Department of Motor Vehicles, for the purposes of ascertaining my qualification to operate any Goucher College owned or leased vehicle, or my personal vehicle in connection with a College-sponsored activity. <u>Refer to list below for states or countries that don't permit anyone other than the individual licensee to request their driving history.</u>

Please check all that apply:

| | Personal Vehicle | Driver certification | ? | College Vehicle Driver certification? | | |
|-------|-------------------------------|--------------------------------|------------------------|--|---------------|---------------|
| | LAST NAME | FIRST NAME | MIDDLE NAME | DRIVER LICENSE NUMBER | STATE | DATE OF BIRTH |
| | | | | Please write legibly |] | |
| | | | | | | |
| Pleas | e write the information above | ve in a legible manner. Illegi | ble handwritten inform | ation cannot be processed, and will be returned to t | he requester. | |
| • | OneCard ID #: | | | Email address | | |
| • | Current Address: | | | | | |
| | | | | | | |
| • | Please indicate he | ere the department th | e requester will b | be representing: | | |
| | | | | | | |
| • | Name of Advisor/S | Supervisor: | | | | |
| • | SIGNATURE: | | | DATE | | |

NOTE:

- 1. The signed driver record request form can be emailed, or sent via campus mail or by any other electronic means to the Goucher College administrator requesting your record.
- 2. The following states or countries do not permit acquisition of a driving record by anyone other than the individual licensee:
 - Alaska, Alberta, British Columbia, California, Georgia, Guam, New Hampshire, Nova Scotia, Ontario, Pennsylvania, Puerto Rico, Quebec, Saskatchewan, Virgin Islands, Washington and Yukon.
- 3. Refer to http://www.dmv.org/ for more information about obtaining your driver record from these states or countries.