



## 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 This authorization is valid as long as I am an employee or employee candidate of the College and may only be rescinded in writing.

I authorize my employer, or its designated agent, to submit a photocopy of my driver's license to the College's designated Car Rental Company as required to reserve a vehicle for my use.

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Employee Name *(Printed)*

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Driver's License Number

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Employee Signature

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Date

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Employee Title & Department

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Employee Email Address

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Facility Management Review Signature

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Date

To request a College-owned or rental vehicle, please complete and submit this Driving Record Review Authorization Form (if not already on file), a photocopy of your driver's license (for rental vehicles only) and the Vehicle Request Form to:

**Valerie Wenger | Facilities Operations Secretary | Plant Operations Building, PO 117**

**[vwenger@wccnet.edu](mailto:vwenger@wccnet.edu) | O: 734.677.5300 | F: 734.677.5475**