DISCLOSURE AND RELEASE FORM EMPLOYEE DRIVING RECORD INFORMATION

1.	Because I must drive as an essential function of my employment or potential employment, I hereby			
	give permission to to obtain my state driving record (also known as my motor vehicle record or MVR) in accordance with the Fair Credit Reporting Act (FCRA) and the Federal Driver's Privacy Protection Act (DPPA).			
2.	I acknowledge and understand that my driving record is a consumer report that contains public record information.			
3.	I authorize, without reservation any party or agency contacted byto			
	furnish	a copy of my state driving record.		
4.	I understand that I have the right to request a copy of my driving record and to know the source or sources of my driving record, for a two-year period preceding my request.			
5.	This authorization shall remain o	on file by for	the duration of my	
	employment, and will serve as ongoing authorization for to procure			
	my state driving record at any time during my employment period.			
6.	I understand that may take adverse action affecting my employment, based on information in my driving record. If such adverse action is taken, I acknowledge that my			
	rights are as follows:			
	1. Employer must notify me in writing of any such adverse action			
	I have the right to receive a copy of the driving record upon which the adverse action was based.			
		eceive a summary of my rights under the Fair Credit Reporting Act. I have		
		the right to know the name, address and phone number of the consumer reporting agency		
	that provided my driving record to			
	4. I have the right to obtain a free copy of my driving record from the agency that provided it, if			
	such request is made within 60 days from the date that Employer took adverse action.			
	I have the right to dispute the accuracy or completeness of my driving record with the consumer reporting agency that provided it, and request that errors be corrected.			
	Employee's Name (Print)	Employee's Signature	Date	
	Social Security Number	 Driver's License Number & State	 Date of Birth	