



Vision, Hope, and Strength for a Better Life

MOTOR VEHICLE REPORT RELEASE

I am applying for employment or change in employment with The Center For Family Services, Inc. I acknowledge that I have been notified by CFS that a Motor Vehicle Record Check will be run to determine if I am eligible to drive for the Agency. I understand that this report will be used to evaluate me for possible employment regarding this or any other CFS driving position.

I also understand that this consent form allows for the ongoing Motor Vehicle Record Checks per CFS policy, if I am employed in a CFS driving position.

The Fair Credit Reporting Act entitles me to know if an adverse employment decision is made based on this information obtained from a Consumer Reporting Agency. If any adverse employment decision is made based on this information, I will be advised. I will also be given the name of the agency or source which provided the information, a copy of the information (Motor Vehicle Report), and a summary of my rights under the Fair Credit Reporting Act.

I, _____, give my permission to allow
(Print Full Name)

Center for Family Services, Inc., to obtain a Motor Vehicle Report on my behalf and to recheck my MVR ongoing per Agency policy if I am employed in a CFS driving position.

Signature Date

Please Print Clearly

Full Name Social Security Number

Position Applied For/Current Position Program

Full Address City State, Zip

Have you been a licensed driver for at least three years? YES NO

Have you been a licensed driver for at least six years? YES NO

Driver's License Number: _____

State Driver's License issued: _____ State of Residence: _____

Do you currently have a graduated or suspended license? YES NO

I acknowledge the above information is current and correct. I understand that if the information is found to be not correct, my application for employment may be denied or, if currently hired, I may be subject to discipline, up to and including termination:

Signature: _____ Date: _____

Hiring Supervisor: _____ Date Submitted to HR: _____