



**NORTH GREENVILLE**  
UNIVERSITY  
*Christ Makes the Difference*

## DRIVER MVR AUTHORIZATION

Please clearly print all information exactly as it appears on your driver's license. Submit completed form along with a copy (front and back) of your driver's license to Campus Enhancement Services. Please allow approximately 7 business days for processing.

Name (Last): \_\_\_\_\_ (MI) \_\_\_\_\_ (First) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP \_\_\_\_\_

How many years at this address: \_\_\_\_\_ If less than 3 years, please list others on reverse side.

Driver's License # \_\_\_\_\_ State Issued: \_\_\_\_\_ DOB: \_\_\_\_\_

SS#: \_\_\_\_\_ Email Address: \_\_\_\_\_

Check one:  Faculty  Staff  Student

Check one:  Full Time  Part Time

### Acknowledgment of Driver Responsibilities

I acknowledge that I have read and understand the information in the North Greenville University Transportation Guidelines and Policies and I agree to abide by all the obligations and requirements contained therein. I understand that failure to comply with these requirements, and/or failure to maintain an acceptable driving record (as outlined in the "Drivers Obligations" section), may result in disciplinary action.

I hereby give my consent for North Greenville University to complete a background check of my driving record in accordance with North Greenville University's Transportation Guidelines and Policy for drivers of university vehicles to determine my driving eligibility for the university. As part of this procedure, North Greenville University has my permission to order Motor Vehicle Records (MVR) from any and all states in which I currently have and have previously had a driver's license. I understand that North Greenville University may also conduct a random background check of my driving record in the future. I further understand that failure to release consent for North Greenville University to conduct a background check of my driving record means, at a minimum, that I forfeit my driving privileges for the university. If I forfeit my driving privileges and my employment duties at North Greenville University include driving, my duties will be reviewed to determine whether I can continue my position without driving privileges for the university and, if so, what additional non-driving duties the university will require.

Driver Signature: \_\_\_\_\_ Department: \_\_\_\_\_

Senior Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*CONTINUED ON BACK*

#### Campus Enhancement Services Use Only

Approved  Denied Date: \_\_\_\_\_ Valid Through: \_\_\_\_\_

Notes: \_\_\_\_\_

**If you have resided at your current residence less than 3 years, please list previous addresses for the last 3 years:**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP \_\_\_\_\_