

**UMATILLA MORROW HEAD START, INC.  
AUTHORIZATION TO OBTAIN MOTOR VEHICLE REPORT**

I have applied for employment with Umatilla Morrow Head Start. Because the position I am applying for may require that I drive a vehicle on behalf of Umatilla Morrow County Head Start, (either agency or personal) I understand that my driving record must be verified by Umatilla Morrow Head Start 's insurance carrier prior to my employment.

I understand that my offer of employment is conditional upon the approval of my driving record by Umatilla Morrow Head Start's insurance carrier. I also understand that if I am offered a position with Umatilla Morrow Head Start, my driving record will be checked periodically by the insurance company.

I hereby authorize Wheatland Insurance Center Inc. and/or the insurance company for Umatilla Morrow Head Start to obtain a copy of my driving record from the Department of Motor Vehicles, and to provide information from that record to Umatilla Morrow Head Start regarding my insurability.

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Drivers License # \_\_\_\_\_ State \_\_\_\_\_

Name of Current Insurance Company \_\_\_\_\_

Policy Expiration Date \_\_\_\_\_

Limits of Liability \_\_\_\_\_

Have you had defensive driving, school bus driver's training, etc.? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any moving violations on your driving record for the last 5 years. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Failure to meet insurance requirements for insurability, may discontinue the hiring process.