DRIVER SCREENING

Complete this form, print, sign and give to the Serve Team Leader.

Personal Information:

Name: _____
Last First Middle Initial

Driver's License: _____
Number State

Vehicle: _____
Year Make Model License State License Number

IN THE PAST THREE YEARS:

1. Have you been at fault for any accident?	☐ Yes	☐ No
2. Have you had any moving traffic violations?	☐ Yes	☐ No
3. Have you had any insurance company cancel or refuse to provide you with auto insurance?	☐ Yes	☐ No
4. Have you had your driver's license revoked, suspended, or restricted?	☐ Yes	☐ No
5. Have you had any physical impairments other than corrective glasses?	☐ Yes	☐ No
6. Have you ever been charged with or convicted of "driving while intoxicated" or "driving under the influence"?	☐ Yes	☐ No

If any question(s) 1-6 have been answered with "yes", please provide full details below: (dates, descriptions, amounts, or other explanation.)

_____

_____

_____

_____

ATTACH COPIES OF:
Driver's License
Vehicle Registration
Vehicle Insurance certificate

Application Verification and Release:
I recognize that Midland Nazarene is relying on the accuracy of the information contained herein. Accordingly, I attest and affirm that all of the information that I have provided is absolutely true and correct.

I voluntarily release Midland Nazarene and any such person or entity listed herein from liability involving the communication of information relating to my background or qualifications. I further authorize Midland Nazarene to conduct a driving record check in accordance to the policy set forth.

I have carefully read the Policy and Procedures (as outlined online at www.midlandnaz.org), and I understand and agree that if a volunteer opportunity is offered, my volunteer experience is for no definite period and may be terminated for unsatisfactory performance or repeated infraction of the rules, regulations and/or policies. I will also treat all information to which I have access in a confidential manner.

Signature: _____ Date: _____

_____

TO BE COMPLETED BY SERVE TEAM LEADER:

This application is (circle one) NEW RENEWAL

_____Applicant interviewed(not req'd for renewal)
_____Church Policy Orientation conducted
_____Copy of driver's license
_____Copy of vehicle registration
_____Copy of vehicle insurance certificate

Serve Team Leader Signature: _____ Date: _____