Add Driver and/or Check Driving Record Request Form

Please complete this form for all employees and volunteers who regularly drive Council-Owned/Rented/Leased vehicles; individuals who receive reimbursement for mileage for their own vehicle; and/or persons who have driving duties as a significant part of their employee or volunteer assignments.

☐ Add Driver and
☐ Check Record

Return Fully Completed form to:

<table>
<thead>
<tr>
<th>Name EXACTLY as it appears on the Driver’s License</th>
<th>Date of Birth</th>
<th>License Number</th>
<th>Expiration Date</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

The Driver is: ☐ Employee or ☐ Volunteer
☐ Year-Round or ☐ Seasonal (if seasonal, inclusive dates are ____________ to ____________)

If the driver has been licensed for less than 3 years in the current state (outlined above), in which state were they most recently licensed: ____________ Name on License (if different than shown above): ______________

Is driver licensed for and familiar with type of vehicle to be driven? ☐ Yes ☐ No
If no, when will training be complete? ______________

How many years of driving experience does the driver have with this type of vehicle? ______ Years

Name of Driver’s Insurance Company: ________________________ Policy Number: ______________

What is the driver’s experience in the last 3 years? (Persons not providing driver’s experience information cannot be approved to drive council owned, leased, or borrowed vehicles.)

Information for the last three (3) years. Mark All Boxes. Use “0”, “N/A” or “None” if necessary.

<table>
<thead>
<tr>
<th>Number of At-Fault Accidents</th>
<th>Number of Moving Violations</th>
<th>Has Your License Ever Been Suspended?</th>
<th>Explain accidents, violations, suspensions. (Use additional sheet if necessary)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>☐ Yes</td>
<td>☐ No</td>
</tr>
</tbody>
</table>

Safe Driving is A Top Girl Scout Priority

I warrant the above information is true and accurate to the best of my knowledge. I authorize any investigation of all statements herein and release the above named Girl Scout Council and its agents from liability in connections with any such investigation. I understand that untrue, misleading, or omitted information may result in dismissal, regardless of the time of discovery by the above named Girl Scout Council. Further, I authorize Palmer & Cay to review my Motor Vehicle Report and discuss with the carrier and/or its agents, representatives or MGA as necessary to determine my eligibility as a driver for the Council. I also give permission for the information to be discussed with the Council.

__________________________________________________  ___________________
Signature of Driver         Date