



Assumption College
-----Annual Driver Disclosure Form-----

Because of liability and insurance concerns, the College now requires those employees or students of the College who drive students, employees, or campus guests on a regular or occasional basis to complete the form below.

Please describe any traffic violations that you were charged with during **the past five (5) years** (these would not include parking tickets).

Please describe any vehicular accidents you were in (as a driver) over **the past five (5) years**.

As part of these new procedures, the College requires your permission to check with the Registrar of Motor Vehicles (RMV) to verify your driving record. Please sign below verifying any information you have provided above, and authorizing the College to verify your driving record with the RMV.

License#: _____ State Licensed in: _____

Print Name: _____ D.O.B: _____

Signature: _____ Date: _____

Please Return this Form to:
Rec Sports Office
Plourde Recreation Center

Note: Employees and students who drive students, employees or campus guests either in their own vehicle or in a campus vehicle must be certified to do so through this process.