Motor Vehicle Driving Record
Release & Authorization

I hereby authorize, without reservation, Creative Services, Inc. of 64 Pratt Street, Mansfield, MA 02048-1927, (800) 536-0093 or (508) 339-5451 and its agents to conduct a full investigation into my motor vehicle driving record and related activities at any point after this authorization and, if hired, throughout my employment. Therefore, I hereby authorize the release of any and all information pertaining to my driving record, documentary or otherwise, as requested by any appropriate employee, agent or representative of Creative Services, Inc. The nature and scope of my investigation will include driving history. I release all courts, probation departments, law enforcement and local, state (including the Minnesota Bureau of Criminal Apprehension), and federal government agencies without exception, both foreign and domestic to furnish any and all background information (driving and/or motor vehicle records) requested by Creative Services, Inc. I understand that this information may be transmitted electronically and authorize such transmissions. I agree that a photocopy of this release shall be accepted with the same authority as the original. CSI's Privacy Policy can be found at http://www.creativeservices.com/html/privacy_policy.html or obtained by request to the above address.

California Applicants Only: California law prohibits Consumer Reporting Agencies and employers from obtaining motor vehicle driving records for employment purposes as a stand-alone service; therefore I authorize the Creative Services, Inc. to conduct a search of an address repository.

California, Minnesota, and Oklahoma applicants or employees only: Please check this box if you would like a copy of the consumer report if one is prepared on you? ☐

(Last Name)

(First Name) **(Middle Name)**

(Other Names) *List all other **NAMES (including maiden or married names)** utilized during the previous 7 years and/or used when obtaining any degrees or certifications.*

Current Address:

City & State: **Zip Code:**

Social Security Number:* **Date of Birth: *** MM/DD/YYYY

Driver's License Number:* **State of Issue:**

Signature: **Date:**

**** Social security numbers, dates of birth, and drivers' license numbers are requested to ensure accurate retrieval of records. They will not be considered by the employer in making employment decisions. This form will be filed separately from your employment application.***