## **Girl Scouts of Citrus Council**

## 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.

Return Fully Completed form to:

ariving duties as a signifi	cant part of the	eir employee or vo	olunteer assignr	nents.  Return Fully Completed	l form to:	
☐ Add Driver and				Customer Care at		
☐ Check Record			customercare@citrus-gs.org with Travel Packet and additional required information			
Name EXACTLY as it appears on the Driver's License			Date of Birth	<u>License Number</u>	Expiration Date	
			<u>State</u>	Class or Type of License	Years of Experience	
Γhe Driver is: □Employo □Year–Ro			inclusive dates	areto	)	
				utlined above), in which s n shown above):		
Is driver licensed for and If no, when will training		• •		□Yes □No		
How many years of drivi	ng experience	does the driver ha	ve with this typ	e of vehicle? Yea	ırs	
Name of Driver's Insurar	nce Company:		P	Policy Number:		
cannot be approved to dr	ive council ow	ned, leased, or bo	rrowed vehicle.	g driver's experience info s.) "0", "N/A" or "None" i		
	ine last timee (	o) years. <u>Mark r</u>	in Dokes. Osc	o , 10/11 of 100fc in	inceessary.	
Number of <u>At-</u> <u>Fault</u> Accidents	Number of Moving Violations	Has Your Lice Ever Been Suspended?	Expla	plain accidents, violations, suspensions. (Use additional sheet if necessary)		
		□Yes □No				
	Safe Dr	iving is A Top	Girl Scout	Priority		
statements herein and release investigation. I understand of discovery by the above n	se the above name that untrue, mislamed Girl Scout carrier and/or it	ned Girl Scout Cour leading, or omitted t Council. Further, as agents, representa	ncil and its agents information may I authorize Palmo tives or MGA as	ledge. I authorize any invests from liability in connection result in dismissal, regardlester & Cay to review my Motor necessary to determine my d with the Council.	n with any such ss of the time or Vehicle	
Signat	ure of Driver			 Date		