

MOTOR VEHICLE REPORT AUTHORIZATION FORM

In connection with your application for employment, or employment as a (Insert Job Title) with Doyle Conner Company we will obtain a Motor Vehicle Report to verify your driving record. Please sign below and provide us with your authorization to procure this report.

AUTHORIZATION

I authorize Doyle Conner Company to obtain a Motor Vehicle Report in connection with my application for employment, or employment.

Applicant/Employee Signature

Applicant/Employee Name

Driver's License Number/State

Date of Birth