

Disclosure and Consent to Procure Motor Vehicle Report for the Use of University of New England Vehicles

The undersigned hereby authorizes the University of New England to obtain copies of a motor vehicle report, pertaining to me for the purposes for use of University vehicles. The motor vehicle report obtained on me will provide information in rating and/or underwriting insurance for which the University of New England may apply, and renewal thereof.

Signature of Operator / Employee / Student	Date
Print Name	Middle Name/Initial on Driver's License
Telephone Number	Date of Birth
Driver's License Number	Expiration Date
Street Address on Driver's License	City, State, Zip Code
Studen	:StaffFaculty
	nt you will be driving for