

EASTERN LANCASTER COUNTY SCHOOL DISTRICT

Motor Vehicle Release Consent Form

In conjunction with my employment or volunteer work at Eastern Lancaster County School District, I _____ (name) consent to the release of my Motor Vehicle Report (MVR) to the School District. I understand it will be used to evaluate my suitability to fulfill driving duties that may be related to my position.

This consent is given in satisfaction of the Public Law 18 USC 2721 et. Seq "Federal Drivers Privacy Protection Act", and is intended to constitute "written consent" as the required by the act.

Full Name: (as it appears on license)	
Driver's License Number:	
Expiration:	
State Issued:	
Signature:	
Date:	