Southern California Conference of Seventh-day Adventists



Driver's Questionnaire [Note: All drivers must be at least 21 years old] Please complete ALL blanks:

| Driver: | | Birth Date: | | | |
|--|------------------------------|-------------|--------------------------------------|-----------|--|
| Last | First | | Middle | | |
| Driver's License No: | | State: | | _ SS#: | |
| Home Address: | | | | | |
| In what other states have you | had a driver's license in | n the pas | t three (3) | years? | |
| For which Southern Calif. Co | nference entity will you | ı be driv | ing? | | |
| | | | | | |
| Years of driving experience in | n the type of vehicle(s) | listed ab | ove (pleas | e specif | y): |
| Total Number of miles driver | annually in all vehicle | s: | | | |
| Please list all citations receive | ed and all accidents invo | olved in, | regardless | of fault | t, within the past three (3) years. |
| Give the dates, description an | d locations of each cita | tion and | or acciden | t: | |
| I hereby authorize the Southe a sub-standard record, I under driver. Otherwise, the Confer | rstand that the Conferen | ce, to obt | ain my mo notify my informatio | otor vehi | _ (Use additional sheets if needed.) cle operating records. In the event of school or entity to find an alternate lential. |
| | Signature of driv | | | | |
| MVR Ordered | ered # of At-fault Accidents | | | | |
| # of Citations | Notified entity | | | | |
| Completed on-line traini | ng course: Y N | Date |): | | |
| Remarks: | | | | | |
| SCC Driver's Questionnaire | Ed. 01-12 | | | | |