## THE SALVATION ARMY MOTOR VEHICLE REPORT REQUEST/DISCLOSURE/AUTHORIZATION FORM

To be completed for all drivers of The Salvation Army (TSA) vehicles or anyone driving a personal vehicle for TSA business.

## DISCLOSURE OF INTENT TO OBTAIN A CONSUMER REPORT

In accordance with the Fair Credit Reporting Act, we hereby notify you that for employment purposes we may request a consumer report in connection with your application for employment or any time during employment. For TSA purposes, a consumer report will be limited to driving records (MVR) available from the appropriate State Departments of Motor Vehicles.

Please complete all fields below. Must be legible — please type or print neatly - Incomplete forms will not be processed!! COMMAND UNIT LOCATION CODE (Completed by Chesterfield) Child of Officer Volunteer ☐Retired Officer Officer Cadet **Employee** Driver's Name Last **First** M.I. (Please Print) Date of Birth: Sex: SS#: xxx-xx-(MM/DD/YYYY) (last four digits only) Driver's License #: State of Issue **Expiration Date:** (MM/DD/YYYY) Is this a DOT driver\*? TYES [ \*Driver must meet DOT requirements if operating a vehicle with a DOT decal and number. Does driver have a CDL? |YES||NO \*\*Driver must have a Commercial Drivers License (CDL) if operating commercial vehicles in excess of 26,000 pounds gross vehicle weight or driving a vehicle designed to transport more than 15 persons including the driver. CERTIFICATION OF RECEIPT OF DISCLOSURE AND AUTHORIZATION TO OBTAIN A CONSUMER REPORT I acknowledge that I have read the "Disclosure of Intent to Obtain a Consumer Report." The name of the consumer reporting agency gathering the consumer report is Intellicorp. I understand that I have a right to dispute any inaccurate information that may appear in the report. I understand that the privilege to drive on behalf of The Salvation Army (TSA) is dependent on my ability to qualify as a driver, and remain qualified, according to TSA Fleet Safety Program Minute (Section 30, Minute 17). I understand and acknowledge that if driving is a requirement of my position with TSA, I may be terminated should I become disqualified to drive. My signature authorizes Chesterfield Services, Inc. ("CSI") to run a Motor Vehicle Report ("MVR") at any time during my service with TSA to evaluate whether I am qualified to drive under TSA Fleet Safety Program Minute. I authorize CSI to release to TSA information contained in the MVR associated with the above name and driver's license number that is necessary to comply with relevant Fair Credit Reporting Act provisions. I further agree to notify The Salvation Army immediately if my driver's license is revoked or suspended at any time during my employment/placement with The Salvation Army and failure to do so may result in disciplinary action up to and including termination. Date: \_\_\_\_\_ Driver's Signature: Supervisor's Signature: Date: Please check this box if you wish to receive a copy of the consumer report. \*Date of birth information will be used by the consumer-reporting agency to try to insure accurate investigation. It will not be used in any employment decision. The Age Discrimination in Employment prohibits discrimination against person 40 years of age or older. This is a legal document and may be subject to audit. TSA must retain a copy of this form with Driver's Signature

and a copy of the current Drivers License.

MVR DISC AUTH 9.18.15