

Troop Driver Request Form

Please complete this form each year for all employees who regularly drive Council Owned/Rented/Leased vehicles; individuals who receive reimbursement for mileage for their own vehicle; and/or persons who have driving duties as a significant part of their employee assignments. **ALLOW TWO WEEKS FOR PROCESSING.**

Add Driver Expiration Date: 09/30/2023 Return to: HR Specialist
 Check Record Fax: 704-874-1540
The Driver is: **VOLUNTEER** E-mail: info@girlscoutsp2p.org

Name (as it appears on Driver's License) _____ Troop #(s) _____

Address _____ City _____ State _____ Zip _____

E-mail Address _____ Phone _____

Date of Birth _____ Years of Driving Experience? _____

Driver's License No. _____ Exp. Date _____ State _____ License Class _____

Name of Driver's Auto Insurance Company: _____ Policy Number: _____

If the driver has been licensed for less than three years in the current state (*outlined above*), in which state were they most recently licensed: _____ Name on License (*if different than shown above*): _____

Is driver licensed for and familiar with the type of vehicle to be driven? Yes No
If no, when will training be complete? _____

How many years of driving experience does the driver have with this type of vehicle? _____ years

Driver experience information: Answer ALL questions. Use "0", "N/A" or "None" if necessary. Persons not providing driver's experience information cannot be approved to drive.

How many At-Fault Accidents have you had in the past three years? _____

How many Moving Violations have you had in the past three years? _____

Has your license ever been suspended? Yes No

Have you ever been convicted of DUI/DWI or Reckless Driver? Yes No

If yes, what is the conviction date? _____

Explain any accidents, violations, suspensions. (Use additional sheets if necessary) _____

Safe Driving is A Top Girl Scout Priority.

I warrant the above information is true and accurate to the best of my knowledge. I authorize any investigation of all statements herein and release the above named Girl Scout council and its agents from liability in connections with any such investigation. I understand that untrue, misleading or omitted information may result in dismissal, regardless of the time of discovery by the above named Girl Scout council. Further, I authorize Palmer & Cay to review my Motor Vehicle Report and discuss with the carrier and/or its agents, representatives as necessary to determine my eligibility as a driver for the council. I also give permission for the information to be discussed with the council.

Signature of Driver

Date