

Information needed to request Motor Vehicle Record

Full Legal Name (include middle name)

Address

Driver's License Number

State of Issuance

Date of Birth

CONFIDENTIAL

Motor Vehicle Record Disclosure and Release Form (Student form)

In connection with my use of a vehicle owned, rented or borrowed by University System of New Hampshire as a volunteer student driver, I understand that a motor vehicle record (or driver record), which contains public record information, may be requested. I further understand that such report(s) will contain personal information and public record information concerning my driving record from federal, state, and other agencies that maintain such records, as well as independent services that provide driving record information.

I authorize, without reservation, any party or agency contacted to furnish the above-mentioned information to USNH, and Fred C. Church, Inc. (Broker) or its commercial automobile insurance carrier.

As the record holder, I hereby authorize procurement of my driver record. This authorization shall remain on file and shall serve as ongoing authorization for you to procure such records at any time during my continued use of a vehicle owned, rented or borrowed by USNH.

Name

Signature

Date

State of New Hampshire

Date: _____ 2024

County of: _____

Signed or attested before me on ____ day of _____, 2024

By _____

Signature of notary public/justice of the peace

Affix Notary Seal

Notary Public, State of New Hampshire My Commission expires _____