

Please return to requesting department or student club.

## Form #2

### CONSENT AND AUTHORIZATION TO PROCURE MOTOR VEHICLE RECORD (MVR)

I acknowledge receipt of the separate documents titled, "MOTOR VEHICLE RECORD (MVR) CHECK DISCLOSURE," and certify that I have read and understand this document and NWTC's Vehicle Use Policy.

I understand that, as a condition of my employment or authority to drive a motor vehicle on behalf of Northeast Wisconsin Technical College (NWTC), I hereby authorize NWTC to obtain my MVR at any time after receiving this signed form and throughout my employment, or volunteer or student status.

I hereby consent to, and authorize, NWTC requesting any and all motor vehicle records from DMI. I agree that a facsimile ("fax"), electronic or photographic copy of this form shall be as valid as the original.

I understand that, pursuant to the federal Fair Credit Reporting Act, NWTC will provide me with a copy of any such MVR report if the information contained in such report is, in any way, to be used in making a decision regarding my fitness for employment, continued fitness for employment, or authority to drive on behalf of NWTC.

If applicable, I further understand that such report will be available to me prior to any such employment decision being made, along with the name and address of the reporting agency that produced the report.

**Please complete the section below**

Name as it appears on driver's license (First, M.I., Last)	Driver's License Number	
Current Mailing Address (Street Address/City/State/Zip)	State of Issuance	Date of Birth (mm/dd/yyyy)
Dept., Program, or Student Organization Name/Number	NWTC Employee ID# or Student ID#	

- I have held a driver's license issued from the state of Wisconsin and *no other* state throughout the past 6 years.
- I have held a driver's license issued from a state other than Wisconsin within the past 6 years. (**Out-of-State License Holder Affidavit Form\*—reverse side of this form—must be completed.**)
- Other than Wisconsin, I have held a driver's license in the following states (list states):  
\_\_\_\_\_
- Out-of-State License Holder Affidavit Form requested/completed.
- I am (check one):
  - an employee (or an applicant for employment) of the College.
  - a student (course requirement to operate vehicle).
  - a student (**not** for a course requirement [e.g., volunteer/driver for a fieldtrip, conference, etc.]).
  - a volunteer of the College (e.g., volunteer/driver for a fieldtrip, conference, etc.).

Signature of Employee/Applicant/Student/Volunteer	Date (mm/dd/yyyy)
Requesting College Department	Phone (xxx) xxx - xxxx
Signature of NWTC Department Representative	Date (mm/dd/yyyy)
DMI <input type="checkbox"/> Approved <input type="checkbox"/> Denied ( <i>Office Use Only</i> )	Date (mm/dd/yyyy)

\*Out-of-State License Holder Affidavit Form (see reverse side if applicable)

GREEN BAY CAMPUS  
2740 W. Mason St., P. O. Box 19042  
Green Bay, WI 54307-9042  
(920) 498-5400

MARINETTE CAMPUS  
1601 University Dr.  
Marinette, WI 54143  
(715) 735-9361

STURGEON BAY CAMPUS  
229 N. 14th Ave.  
Sturgeon Bay, WI 54235-1317  
(920) 746-4900

## Out-of-State License Holder Affidavit

*This form must be completed if driver's license is issued from another state within the past six years.*

I hereby attest that my Motor Vehicle Record (during the time I held a license issued from a state other than Wisconsin) does not contain any incidents that would deem me "not acceptable" (utilizing the following criteria):

### Motor Vehicle Evaluation Criteria (last six years)

**5 POINTS OR LESS IS DEEMED ACCEPTABLE TO OPERATE A MOTOR VEHICLE ON BEHALF OF THE COLLEGE.**

INCIDENTS (See DEFINITIONS for more information)	POINTS ASSESSED
Minor (not involving an accident)   [Assessed through 5 <sup>th</sup> anniversary from date of incident]	1
Accident   [Assessed through 5 <sup>th</sup> anniversary from date of incident]	2
Major (0-2 years old) [Assessed through 3 <sup>rd</sup> year anniversary of date of incident]	6
Major (3-5 years old) [Assessed through 6 <sup>th</sup> year anniversary of date of incident]	3
IN ADDITION TO ABOVE	
Two incidents* within 12 months	1
Three incidents* within 18 months	2

### DEFINITIONS

**Accident:** An accident arising out of the use of a motor vehicle due to the negligence of the operator, including but not limited to, Property Damage, Injury, etc. Accidents indicated as "DEER" are not assessed any points.

**Incident:** Accident, minor conviction, or major conviction.

**Major Convictions:** Major convictions include, but are not limited to, driving while intoxicated or under the influence of alcohol or drugs; failure to stop and report an accident; homicide, manslaughter, or assault arising out of the operation of a motor vehicle; driving during a period while license is suspended or revoked; reckless driving; possession of opened container of alcoholic beverage; speed contest, drag or highway racing; attempting to elude a peace officer; license revocation or suspension (no points are assessed on suspensions/revocations resulting from, including but not limited to: failure to pay fines, or support; judgments for incidents not involving driving).

**Minor Convictions:** Any moving traffic conviction other than a major conviction, except the following: Motor vehicle equipment, load, or size requirement; Improper display or failure to display license plates provided such plates exist; failure to have in possession driver's license (provided valid license exists); defective speedometer (unless multiple incidents – then each assessed as minor violations); proof of insurance violation; seat belt violation.

I acknowledge that Districts Mutual Insurance (DMI) will employ the above criteria to evaluate my status to operate a motor vehicle on behalf of the College. I (the undersigned) declare that as a potential operator of a Northeast Wisconsin Technical College owned vehicle or an individual driving any other motor vehicle on behalf of the College, I have held a driver's license issued by a state other than Wisconsin within the past six years.

State of Issuance: \_\_\_\_\_ Dates Held (Approx.): \_\_\_\_\_

Name (print) \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Witnessed by (Name – College Rep): \_\_\_\_\_ Date: \_\_\_\_\_

Witness Signature: \_\_\_\_\_