

Letter of Authorization Motor Vehicle Report Must Be Signed by SMU Employee and/or Student

Southern Methodist University
Office of Risk Management
Dawson Service Center
3030 Dyer Court Suite 170, Dallas TX 75275 • P.O. Box 750231, Dallas TX 75275

ATTENTION:

To the Authorized Representative of Southern Methodist University:

I am aware that consumer and motor vehicle reports may be obtained as part of Southern Methodist University's evaluation of my job application, employment, and/or qualification to drive and operate a University owned, courtesy, leased or rental vehicle in the process of performing duties outlined in my job and/or employment description. The reports may be procured by Southern Methodist University, and may include personal information obtained from state motor vehicle departments, and my driving record.

By signing this letter, I hereby provide my authorization for Southern Methodist University to procure such information and reports, as an assessment of my insurability for the SMU fleet safety program to evaluate my ability to operate a motor vehicle as part of my employment.

Please check appropriate box: ☐ FACULTY ☐ STAFF ☐ STUDENT

Name as It Appears on Driver License (*Print Legible*)

Driver License Number/State of Issuance

Date of Birth

Signature Applicant/Employee

Date

Department or Organization Supervisor or Staff Designee

Date

Revised August, 2007

Submit this completed form to the Assistant to the Chair of the Department of English