



MOTOR VEHICLE REPORT CONSENT FORM

I, _____ give my consent for THA Group to complete a background check on my previous driving record in accordance with THA Group’s Motor Vehicle Record policy for drivers. As part of this procedure, the company has my permission to order (MVRs) from any and all states I have currently and previously held a drivers license. I understand that the company has an MVR review program. I further understand that failure to release consent for THA Group to conduct a background check on my previous driving record means that I may forfeit my driving privileges. In the event that I forfeit my driving privileges, I understand that, since my job duties include driving, my duties will be reviewed to determine whether I can continue my position without driving.

Signature

Date

Name (exactly as it appears on driver’s license): _____

Position: _____

Date of Hire: _____

Sex: _____

Date of Birth: _____

Driver’s License #: _____

State: _____