



Scofield | Christian School

**INDIVIDUAL'S WRITTEN CONSENT FOR RELEASE OF MOTOR
VEHICLE RECORD TO SCOFIELD MEMORIAL CHURCH**

I, (name) _____, hereby certify that I grant access to my Driver's License/ID Card record, inclusive of the personal information (name, address, driver identification number, etc.). To the above requestor, this access is granted one time a year for as long as I am on their approved drivers list, regardless of the restriction I have placed on my records for public access.

X _____
Signature of Licensed Card Holder

Date

PLEASE INCLUDE: A copy of your driver's license and a copy of your automobile insurance. Thank you!

PLEASE NOTE:

If you have had a moving violation in the last three years, you are not an eligible driver and do not need to complete this form.

Also, following the approval process if you receive a moving violation, you will no longer be an eligible driver and will need to notify the SCS office immediately.