~Application to be completed by all drivers, compared to the Driver Eligibility Guidelines and Motor Vehicle Record for compliance. To be maintained in church records ~

NORTH TEXAS CONFERENCE UMC APPLICATION FOR "QUALIFIED DRIVER" STATUS

UMC Member Church: _____

Address:	
Employee/Volunteer Name:	Date of Birth://
Address:	
	(State) (Zip)
Driver's License Number: State of Issuance:	Expiration Date://
Do you own a vehicle? Do you have auto insurance coverage in your name?	
Have you ever been convicted of DWI or DUI of alcohol or drugs?	
Have you received any citations for moving violations in the past the	hree (3) years?
Have you been involved in any accident within the past three (3) y fault? Past experience and/or training that qualifies applicant for operation	
driving courses: Dates Experience/Training	<u> </u>
1	9
1 2 3	
3	
Driving Record — List all accidents and traffic convictions during pas	et three (3) veare:
Dates Nature of Accident/Traffic C	
1	
2 3	
3	
Insurance follows the title of the vehicle. If I am asked to use my personal a understand my personal / individual liability and physical damage insurance. I hereby do affirm my signature on all of the above information/statements.	e coverage is primary.
that all information is true and complete to the best of my knowledge. I here Eligibility Guidelines and meet or exceed the qualifications as outlined. I ac Motor Vehicle Research Report on my driving record and to also complete	eby do affirm I have read the Driver gree to allow church to obtain a
Employee/Volunteer Signature	Date