

Miss Bonnie Fletcher
North Central University
910 Elliot Avenue
Minneapolis, MN 55404

Dear Bonnie,

I am aware that consumer and motor vehicle reports may be obtained as part of North Central University's evaluation of my ability to drive a school vehicle. The reports may be procured by North Central University or its insurance company representative(s), and may include personal information obtained from state motor vehicle departments, my driving record, an assessment of my insurability for the insurance program, or other consumer reports.

By signing this letter, I hereby provide my authorization for North Central University or their insurance company representative(s) to procure such information and reports to evaluate my insurability or for other permissible purposes.

Sincerely,

Signature Applicant/Employee

Name as it appears on Drivers License

Driver's License Number/State of Issuance

Date of Birth