

Driving Record Retrieval

Procedures

Driving records should be checked for positions that require employees or volunteers to drive vehicles as a job function or if in the course of their duties they will transport clients, patients, students, wards or other persons of the public with **any vehicle** whether it be owned by the parish, a rental or a privately owned vehicle.

During the interview process the applicant should be verbally informed that the position that they are applying for or volunteering for requires a good driving record and because he or she will be driving either a parish owned vehicle or a privately owned including their own vehicle, we request permission to obtain a motor vehicle report to check their driving record. Inform the applicant that if the MVR report is unfavorable it may negatively impact the decision to either hire them or use them in a particular capacity.

Instructions:

1. Inform the applicant /volunteer that the position they are applying for requires a valid license and a good driving record, therefore we request permission to check their driving record.
2. Provide the applicant with a copy of the **“Consumer Report Disclosure Form” (MVR/CRD 2)-7/14. (The applicant keeps this)**
3. Request to see their drivers’ license and ask permission to make a copy of it.
4. Ask the prospective employee / volunteer to sign the **“Release and Applicant Consent Form” (MVRR 1)-7/14** allowing your location to check their driving record. Keep original in a secure place and forward a copy to RCAB, Department of Risk Management. **617-779-4572 OR – scan to ormadmin@rcab.org**
5. Keep copies of your submission and the report in a secure location.

Consumer Report Disclosure Form

Read This Carefully

In connection with employment or volunteer services with the Roman Catholic Archdiocese of Boston or its affiliates, consumer reports may be obtained. The report may contain information that has a bearing on a person's driving record.

If the Archdiocese of Boston or any of its affiliates, agents or representatives intends to take adverse action against any applicant, employee or volunteer based on the information contained in a report, the applicant, employee or volunteer will be notified in writing and will receive a copy of the consumer report.

An applicant, employee or volunteer must give written consent for a consumer report to be obtained. If you consent that The Roman Catholic Archdiocese of Boston and its agents or representatives, may obtain consumer reports regarding your driving record, please sign the Consent Form to Obtain Consumer Reports. The Consent Form is separate from this document.



Driving Record Retrieval Release and Applicant Consent Form

Requestor Information

Parish Name: _____

Parish Address: _____

Name of person requesting: _____

Sent to:

**RCAB Office of Risk Management, Pastoral Center, 66 Brooks Drive, Braintree MA 02184
FAX 617-779-4572 or scan to ORAdmin@rcab.org**

Please Fill Out All Fields Below

Applicant/Subject Information:

Name: _____
First MI Last

Telephone: _____ Cell or alternate phone: _____

Current Address: _____
Street City State Zip

Drivers License Number: _____ State: _____ Expiration Date: _____

Date of Birth: _____

In connection with any application made by me, I understand that investigative background inquiries may be made on me concerning matters of motor vehicle information. I understand that you may be requesting information from various Federal, State, and other agencies which maintain records concerning past activities relating to my driving records.

I authorize, without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from any liability and/or responsibility for doing so. I hereby consent to The Roman Catholic Archdiocese of Boston, its agents and representatives to obtaining such information from American Driving Record and/or any of their agents. This authorization and consent shall be valid in an original, fax or copy form. I recognize that these inquiries may be made randomly in the future and no further authorization is required by me.

Applicant's Signature: _____ Date: _____