



MT. PLEASANT PUBLIC SCHOOLS

720 North Kinney Avenue
Mt. Pleasant, Michigan 48858
(989) 775-2300 Fax: (989) 775-2309
mp.edzone.net



Superintendent
Jennifer Verleger

Chief Financial Officer
Ginger Faber

Asst. Superintendent/Personnel
Linda Boyd

Consent to Obtain Driver's License Records

Last Name

First Name

Middle Initial

Building Assignment/Position

Email

(Initial) _____ I am currently, or will be utilized by Mt. Pleasant Public Schools as a permanent employee, coach or volunteer. I understand it may be necessary for me to drive a school vehicle.

(Initial) _____ I understand that Mt. Pleasant Public Schools must request a history check of my Driver's License issued by the State of Michigan. I will be notified via email of my ability to drive a Mt. Pleasant Public Schools vehicle.

(Initial) _____ I am providing a copy of my Michigan Driver's License and I authorize Mt. Pleasant Public Schools to perform a driving record check with the State of Michigan. I understand the State will continue to update the Mt. Pleasant Public Schools of my driving record.

Driver's License Number

Applicant Signature

Date

Requesting Administrator Signature

Date