

CONSENT AND DISCLOSURE

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LAST NAME – AS LISTED ON DRIVER'S LICENSE

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FIRST NAME – AS LISTED ON DRIVER'S LICENSE

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STREET ADDRESS – AS LISTED ON DRIVER'S LICENSE

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CITY – AS LISTED ON DRIVER'S LICENSE

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STATE

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ZIP CODE

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DATE OF BIRTH (MM/DD/YYYY)

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DRIVER'S LICENSE NUMBER

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STATE

EMAIL ADDRESS: _____

I understand that Vanderbilt University will utilize the services of a consumer reporting agency as part of the procedure for processing my application for being a Vanderbilt volunteer driver. The nature and scope of this consumer report is solely a motor vehicle records search that will include information on my driving record. This consumer report will NOT include a credit report, criminal history search or any other type of personal records search.

I also understand that if I am denied leased vehicle driving privileges based, in whole or part, on information obtained in the consumer report, I will be provided a copy of the report and a description in writing of my rights under the Fair Credit Reporting Act. I understand if I disagree with the accuracy of any information in the report, I must notify Vanderbilt University within five business days of my receipt of the report if time permits. If I notify Vanderbilt University within five business days of the receipt of the report that I am challenging information in the report and if time permits, Vanderbilt University will not make a final decision on my volunteer status until after I have had a reasonable opportunity to address the information contained in the report.

I hereby consent to this investigation and authorize Vanderbilt University to procure a consumer report, which will only include a motor vehicle record search from the contracted consumer reporting agency. The motor vehicle record will be processed annually if I am a volunteer during each year. In order to verify my identity for purposes of the motor vehicle record search I am voluntarily releasing my date of birth for my own benefit and fully understand that age is not a consideration of service.

SIGNATURE

DATE

Minnesota & Oklahoma applications only: I have the right to request a copy of my consumer report from the consumer reporting agency by checking the box below. The report will be mailed directly to me. Minnesota applications only: I have the right to make a written request to the consumer reporting agency to provide me with a complete and accurate disclosure of the nature and scope of the consumer report.

I wish to receive a copy of the consumer report. (check box only if you wish to receive a copy)