Hiring Department:_____ Account #:_____Chartfields_____

Supervisor:_____

University of Maine

Supplemental Application Form for Positions That Require Driving

The University of Maine requires the completion of this supplemental application form for positions that require the employee to drive a vehicle as a major duty of the job. A record of driving offenses will not necessarily make you ineligible to be hired; decisions will be made based on the circumstances of each individual situation.

*NAME:*_____
First *Middle* *Last*

*CURRENT ADDRESS:*_____
Street *Town* *State* *Zip* *Phone*

*PREVIOUS ADDRESS:*_____
Street *Town* *State* *Zip*

1. *Other names under which my records might be found (maiden name, former name, etc):*

   _____

2. *Date of birth* _____ 3. *Social Security #* _____

4. *Have you ever been convicted of a motor vehicle violation in the **last six years**? This includes such things as speeding tickets, operating an uninspected/unregistered vehicle, **operating under the influence, operating after suspension**, etc.) YES_____ NO_____*
   - *If yes, what was the nature of the conviction?* _____
   - *In what year did the conviction occur?* _____ *In what state did the conviction occur?* _____
   - *Has your license ever been suspended or revoked? YES_____ NO_____*
   - *If yes, when?* _____ *In what state?* _____ *For what reason?* _____

5. *Were you a vehicle operator in any reportable motor vehicle accidents? YES_____ NO_____*

6. *Do you possess a valid driver's license? YES_____ NO_____ Please note that Maine law requires individuals to secure a Maine driver's license within 30 days of establishing a residence in Maine. Once a Maine license is obtained, any current out-of-state license should be turned in to any local Motor Vehicle office. Confirmation of the acquisition of a Maine license will be required to complete this check. Copies of the Maine Motorist Handbook & Study Guide to prepare for the written license examination are available at no charge from any local State Motor Vehicle Office.*
   - *License number* _____ *State* _____ *Class* _____ *Expiration date* _____
   - *Restrictions on license* _____

7. *Are any charges of motor vehicle violations currently pending against you? YES_____ NO_____*
   - *If yes, please explain:*_____

I CERTIFY THAT THE ABOVE INFORMATION IS ACCURATE. I UNDERSTAND THE FOLLOWING:

1. *If I am selected for a position that requires driving a vehicle, my driving record will be checked with the Division of Motor Vehicles.*
2. *If information on my driving record indicates that my driving will place people or property at risk, the offer of employment may be withdrawn or my employment may be terminated.*
3. *Falsification of information on this form will make me ineligible to be hired or will be grounds for discharge.*
4. *The information obtained as a result of this driving record check will be treated with utmost respect for my confidentiality and privacy.*

_____ _____
Signature *Date*

Return to: Background Checks
5717 Corbett Hall Rm 140
University of Maine
Orono, ME 04469-5717
or fax to (207) 581-1615

Reset

09/2009 OHR-JY