



City of Glendale
Drivers License Information Request Form

Please print:

Employee ID: _____

Name (As it appears on your driver's license): _____
Last First MI

Drivers License Number: _____

State: _____

Issue Date: _____ Expiration Date: _____

Class:

Graduated (Class G):

Operator (Class D):

Motorcycle (Class M) :

Commercial (CDL): A B C

Endorsements: _____

I hereby certify that the information provided above is correct.

Employee Signature

Date

Supplemental Questionnaire

Please complete the following sections:

Do you have a valid Driver's License?	Driver's License Number:	State:	CDL?	Classification:
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No	

List any CDL endorsements:

<p>In the past three years, have you had any minor and/or major traffic offenses that resulted in your paying a fine and/or receiving a conviction?</p> <p><i>Some examples include: speeding, reckless operation, hit-and-run, D.U.I., moving and non-moving violations, etc.</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If you answered "YES", please provide information about the traffic offense(s):

Offense	Date

I hereby certify that all statements contained herein are true to the best of my knowledge. I understand that omissions or misstatements may be cause for rejection of this application, removal of my name from the eligible list, or discharge from City service. I understand that this information is subject to verification with my former employers.

Printed Name

Signature

Date



Driver Record of Violations Certification Form

Driver's Certification

I certify that the following is a true and complete list of traffic violations (other than parking violations) for which I have been convicted or forfeited bond or collateral during the past 12 months.

Employee Name: _____ Employee ID: _____

Date of conviction	Offense	Location	Type of motor vehicle operated

If no violations are listed above, I certify that I have not been convicted or forfeited bond or collateral on account of any violation required to be listed during the past 12 months.

Print Name: _____

Signature: _____ Date: _____

This section to be completed by Human Resources

Reviewed by:

Print Name: _____ Title: _____

Signature: _____ Date: _____

City of Glendale
5850 W. Glendale Ave.
Glendale, AZ 85301