

DRIVING RECORD EVALUATION:

This form must be completed to be considered for employment/volunteer membership.

All applicants for volunteer or career positions with Littlerock Fire Rescue will have their driving records evaluated. Littlerock Fire Rescue uses the violation point system listed below. If your permanent driving record reflects a total of six (6) points or more for a period of 36 months (3 years) preceding the date of your application, you will not be allowed to continue in the application process. Therefore, if you know that your driving record totals six or more points based on the information below, do not apply at this time. If your driving record is less than six points, you may apply. However, any new violations that occur before the completion of the probationary process, which put your total score over the six points will disqualify you. Annual evaluations of a member's driving record may be made during a member's employment or volunteer service.

VIOLATIONS

POINTS

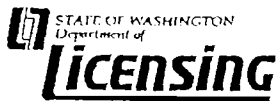
Revocation of drivers license	8
Denial of issuance of driver's license	8
Negligent homicide	8
Driving while intoxicated (involving an accident)	8
Driving while intoxicated (not involving an accident)	6
Reckless driving (involving an accident)	8
Reckless driving (not involving an accident)	6
Negligent driving (involving an accident)	5
Negligent driving (not involving an accident)	4
Hit and Run (attended, occupants in vehicle)	8
Hit and Run (unattended, no occupants in vehicle)	6
Driving while license is suspended (DWLS)	4
Speeding in excess of the posted limits:	
0-14 mph over	2
15-19 mph over	3
20-25 mph over	4
Over 25 mph over	5
Convictions or forfeitures for other moving violations:	
Each violation involving an accident	4
Each violation not involving an accident	2

Signature:

I certify that the information contained in this application and in all materials is true, correct, and complete to the best of my knowledge. Under penalty of perjury I understand that consideration of this application and the continuations of any subsequent employment depend on the true, accurate, and complete representation of these facts. I understand that my application will not be considered unless it is signed. I authorize Littlerock Fire Rescue to make inquiries regarding the information on my application and waive my right to confidentiality for purposes of such inquiries. I release all parties and persons associated with such inquiries in connection with the information they give.

I UNDERSTAND THAT MY APPLICATION WILL NOT BE CONSIDERED UNLESS IT IS SIGNED.

Signed: _____ Date: _____



EMPLOYER REQUEST FOR ABSTRACT OF DRIVING RECORD

An abstract of driving record must be obtained through the Department of Licensing. The Department will not provide a driving record unless this form is signed by the employer and the employee/ prospective employee.

FOR VALIDATION ONLY

106-060-421-0005

EMPLOYEE/ PROSPECTIVE EMPLOYEE

NAME OF EMPLOYEE/ PROSPECTIVE EMPLOYEE (Last, First, Middle)	
WASHINGTON DRIVER LICENSE NUMBER	DATE OF BIRTH (Month, Day, Year)
I hereby authorize the Department of Licensing to forward my driving record to the employer/prospective employer below.	
X EMPLOYEE/PROSPECTIVE EMPLOYEE SIGNATURE	DATE SIGNED (valid four months)

EMPLOYER

EMPLOYER	Thurston County Fire District NO. 11		
EMPLOYER MAILING ADDRESS	10828 Littlerock RD SW		
CITY	STATE	ZIP	
Olympia	WA	98512	
I hereby certify that this company is an employer or prospective employer of the named individual; and that the abstract of driving record shall be used exclusively to determine whether the named individual should be employed to operate a commercial vehicle or school bus on the public highways, and that no information contained therein shall be divulged, sold, assigned, or otherwise transferred to any third person or party. Commercial vehicle means any vehicle the principal use of which is the transportation of commodities, merchandise, produce, freight, animals, or passengers for hire. The information contained in the abstract of driving record obtained from the Department of Licensing shall be used in accordance with requirements and in no way violate the provision of RCW 46.52.130.			
I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.			
X EMPLOYER SIGNATURE AND TITLE	PLACE SIGNED	DATE SIGNED	

A fee of \$5.00 is required for each driving record. Fee should be in the form of a check or money order made payable to the Department of Licensing. Please allow two weeks from date of mailing to receive the record.

Please mail your request to: Department of Licensing
Driver Records
PO Box 9048
Olympia, WA 98507-9048

For questions, contact Customer Service at (360) 902-3900.

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please call (360) 902-3900 or TTY (360) 664-0116.