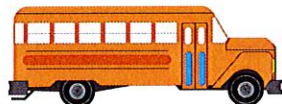


# MERCER COUNTY SCHOOLS

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Perry Harp  
TRANSPORTATION DIRECTOR  
600 Robinson ROAD  
HARRODSBURG, KENTUCKY 40330

Telephone (859)733-7240  
Fax (859) 733-7244



To: School Personnel for Driving School Vehicles

Re: Renewal of Agreement & Criteria Needed

There are certain conditions that school employees must meet each year in order to transport school students in school vehicles. Each employee will need to complete the required training developed by the Mercer County Board of Education.

Those conditions are as follows:

- Motor vehicle records check to be completed at the beginning of each school year. This form must be notarized. There is a Notary at Large located in each school building as well as the Bus Garage. Please contact the notary in your building, if possible.
- A copy of your driver's license. This must be enlarged to 200%.

These items **MUST** be current for each year before you will be allowed to drive any school vehicle.

Please fill out the attached forms and return to the Transportation Department.

Thank you in advance for your complete cooperation.

Sincerely,

Perry Harp, Transportation Director



**DRIVER LICENSE HISTORY RECORD REQUEST**

**INSTRUCTIONS:** Return completed form along with required payment (\$3.00) to the Kentucky Transportation Cabinet, Department of Vehicle Regulation, Division of Driver Licensing, 200 Mero Street, 2<sup>nd</sup> Floor, Frankfort Kentucky 40622.

This form and additional information can be found at [drive.ky.gov](http://drive.ky.gov).

**SECTION 1: DRIVER INFORMATION**

FIRST NAME	LAST NAME	DRIVER LICENSE #	SOCIAL SECURITY #	
MAILING ADDRESS		CITY	STATE	ZIP
EMAIL		PHONE	DATE OF BIRTH	

**SECTION 2: REQUESTOR INFORMATION**

FULL NAME	EMAIL	PHONE
MAILING ADDRESS	CITY	STATE
		ZIP

Select the information requested.

- [Three-year Driving History Record](#) (also available for purchase and download online)
- Certified full Driving History Record/clearance letter to transfer KY license to another state (*Notarization required.*)
- Other (*Please specify.*): \_\_\_\_\_

Pursuant to 18 U.S.C Section 2722, the Driver's Privacy Protection Act of 1994 states, "It shall be unlawful for any person knowingly to obtain or disclose personal information from a motor vehicle record for any use not permitted under section 2721(b) of this title." I certify that this release of information is permissible for the purpose checked above and will be used only as indicated. I, the undersigned, take full responsibility for any violations of the Act.

\_\_\_\_\_  
 PRINTED NAME OF AGENCY REPRESENTATIVE                      REQUESTOR SIGNATURE                      DATE  
*(if applicable)*

**SECTION 3: AUTHORIZATION** (*required if certified full Driving History Record is checked above*)

I, the undersigned, authorize the Division of Driver Licensing to release my **full Driving History Record** to the requestor (individual or agency) specified in Section 2 above.

\_\_\_\_\_  
 PRINTED NAME                      SIGNATURE                      DATE

County of \_\_\_\_\_

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary Public \_\_\_\_\_ My commission expires \_\_\_\_\_.