DRIVER'S LICENSE INFORMATION

_____ Position Applied For: _____
LAST NAME FIRST MIDDLE

_____ Department: _____
ADDRESS

_____ Are you currently employed by the City?
CITY STATE ZIP CODE _____ Yes _____ No

NC Driver's
CHECK THE TYPE OF LICENSE YOU HAVE BELOW: License No. _____

___ CLASS A - CHAUFFEUR'S ____ CLASS B - CHAUFFEUR'S _____ CLASS C - OPERATOR'S

****

REC. NO. _____(This space for office use only)

_____ _____
Requested By Date

( ) Approved to operate City-Vehicle
( ) Not approved to operate City-Vehicle (See remarks below)
( ) Approved, with considerations listed below

COMMENTS:

DATE: _____ EVALUATION BY: _____

MALES AGE 18 THROUGH 25 ONLY

State law prohibits local governments from employing any one who has not complied with Selective Service Registration regulations. Currently, males from age of 18 through 25 are required to register with the federal government in accordance with the Military Selective Service Act. By your signature below, indicate if you have or have not complied with this requirement.

YES I have met selective service registration requirements.

_____
Signature

NO I have not met selective service registration requirements.

_____
Signature