



New York State Department of Motor Vehicles

**EMPLOYEE DRIVING HISTORY**

The person named below has applied for a job with us. To comply with Section 509-m of the New York State Vehicle and Traffic Law, please complete the boxes below and answer questions 1 - 4, to the best of your knowledge. **New York State Vehicle and Traffic Law Section 509-m(7):**

*“The Commissioner shall prepare and distribute a form for the provision of objective data concerning the driving history of a bus driver who is subject to regulation under this article. Such form shall be completed by current or former employers of such bus drivers upon the request of a prospective or subsequent employer.”*

**The requested information should cover the period of time that this person worked for you:**

Employee's Name	
Employee's Title	Employee's Dates of Service
Type of Vehicle(s) Driven by Employee	No. of Hours Per Week Driven by Employee
Carrier's Name (Employer)	

I hereby authorize the above-named employer to release all information regarding my driving history while in its employ. I release the above-named employer from any and all liability which may result from furnishing such information.



\_\_\_\_\_  
(Employee Signature)

\_\_\_\_\_  
(Date)

1) Was the employee convicted of a driving-related offense, that is, a violation of the Vehicle and Traffic Law?

Yes                       No

If “Yes”, please specify the date, location and description of each conviction.

2) Was the employee involved in an accident that had to be reported to an appropriate state agency?

Yes                       No

If “Yes”, please specify the date, location and, if possible, description of each accident.

Employee's Name:

3) Was the employee disqualified and/or suspended or revoked for a driving-related offense?

Yes                       No

If "Yes", please specify the date and reason for all such disqualifications and/or suspensions or revocations.

4) Was the employee disciplined for a driving-related offense that resulted in his/her suspension, termination or disqualification?

Yes                       No

If "Yes", please specify the date and reason for all such disciplinary actions.

*Please return this completed driving history to the following address:*