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## MVR REQUEST / RELEASE FORM

DATE: \_\_\_\_\_

INSURED:      JOHNNY O'S INC. ETAL

EMPLOYMENT CANDIDATE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_

DRIVERS LICENSE #: \_\_\_\_\_

*I authorize Johnny-O's, Inc. etal and Leonard Insurance Services Agency, Inc. to check my motor vehicle record for "Prior to hire" background investigation.*

*I understand the results of my motor vehicle report may affect my employment eligibility with Johnny-O's Inc.*

\_\_\_\_\_  
*Print Name/Employee Candidate*

\_\_\_\_\_  
*Signature/ Employee Candidate*