WASHINGTON STATE DEPARTMENT OF LICENSING

Driving Record Release of Interest

Employers, prospective employers, volunteer organizations, or their agent can get driving records for an employee, prospective employee, or volunteer when authorized. Use this form to get their authorization.

- Complete the Company section.
- Give this form to your employee, prospective employee, or volunteer to complete their section.
- For audit purposes, keep this completed form in your files for at least five years. Do not mail it to the Department of Licensing.

Sealed juvenile records. Information contained in a driving record related to a sealed juvenile record may not be used for any purpose unless required by federal law. The employee or prospective employee may furnish a copy of the court order sealing the juvenile record to the employer, prospective employer, or their agent.

Company – To be completed by the company or the agent of the company

PRINT or TYPE Company name
Seventh-day Adventist Church - North American Division - Washington Conference of SDA

Agent company name *(if applicable)*
First Advantage

Company/Agent company address
7271 Engle Road, Suite 200, Cleveland, OH 44130

Authorized representative name	Title
Heather Brueske	HR Associate Director

Answer the following

1. Is this company an employer, prospective employer, or volunteer organization of the individual whose driving record is being requested? . . . . . ☑ Yes ☐ No
2. Is the record you are requesting necessary for employment purposes related to driving by the employee or prospective employee as a condition of employment or related to driving by the volunteer at the direction of the volunteer organization? . . . . . ☑ Yes ☐ No
3. Do you agree to use the information contained in the record exclusively for this purpose and not divulge it to a third party? . . . . . ☑ Yes ☐ No
4. Do you agree to hold harmless the Washington State Department of Licensing for all matters relating to the release of the requested driving record? . . . . . ☑ Yes ☐ No

Certification

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Date and place signed	Authorized representative signature
03/04/2026 Federal Way, WA	X Heather Brueske Digitally signed by Heather Brueske Date: 2026.03.04 14:39:07 -08'00'

Employee, prospective employee, or volunteer – Complete this section and return the form to the company

PRINT or TYPE Full name *(First, Middle, Last)* of employee/prospective employee/volunteer	Date of birth (mm/dd/yyyy)	WA driver license number

Authorization from

☐ Employee – for release of my driving record for employment purposes, at my employer's discretion for the full term of my employment

☐ Prospective employee – for release of my driving record for employment purposes, not to exceed 30 days from date signed

☐ Volunteer – for release of my driving record for a position applied for that requires me driving at the direction of the volunteer organization

Employer, prospective employer, or volunteer organization name
Seventh-day Adventist Church - North American Division - Washington Conference of SDA

Employer agent company name if acting on behalf of the company for employment purposes
First Advantage

Authorization

I am an employee, prospective employee, or volunteer of the company named above and I request that a copy of my Washington State driving record be sent to them/their agent.

X _____
Signature Date

RCW 46.52.130
DSC-425-020 (R/5/19)WA