

## **UW-Madison: Notarized Statement of Driving Record**

A Notary is legally required to witness and certify the validity of this document. Notaries are available at the Risk Management office by appointment.

APPLICANT INFORMATION				
Driver Name as it appears on license:				
U have held my WISCONSIN license for less than three years				
I have held my WISCONSIN license for less than three years				
Prior to holding my current WISCONSIN license I was licensed in the state or country of:				
MOVING VIOLATIONS				
I have been ticketed for the following moving violations in the past 3 years. If none, please enter <b>"None."</b> Be as specific as possible				
(i.e. if cited for speeding, indicate how many miles over posted limit).				
Date:	Citation Description	Litation Description:		
		DENTS		
I have been involved in the following accidents in the past 3 years. If none, please enter <b>"None."</b> Be as specific as possible.				
	T			
Date:	At fault? (Yes/No)	Accident Description:		
I certify that the above are true statements about my driving record for the past 3 years and that I have not omitted any relevant				
information.	ents about my unving i	ecold for the past 5 years and that I have not officte	eu ally l'elevallt	
Signature of Applicant:		Date signed:		
		Date signed.		
Subscribed and sworn before me this	day of	20		
	uay UI	,20		
My commission expires County of			1	
	SEAI	L		
Notary Signature:				

Departments: send completed forms to: Risk Management, 21 N Park Street, Suite 5301 (campus mail) or via fax: 608-262-9082. DOA Records Management requires that the original form be kept in the personnel file.