COLLEGE-SPONSORED TRAVEL

RELEASE AUTHORIZATION ADDENDUM FORM

(TO BE COMPLETED ONLY IF STUDENT DRIVER HAS COMPLETED THE RELEASE AUTHORIZATION IN THE SAME SEMESTER)

I, _____, a student of Mitchell Community College,
(print name)

hereby certify that I have signed an authorization to release information to Mitchell Community College regarding my driving record and I attest that since that date, I have received no major vehicle convictions in the last year and my North Carolina Driver's License is valid.

_____ _____
Students signature Date