

**Diocese of Erie**  
**Application for Driving Privileges**

Date \_\_\_\_\_

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**Personal Information**

Name \_\_\_\_\_  
*(First) (Middle) (Last)*

Address \_\_\_\_\_ How Long? \_\_\_\_\_ (# of years)  
*(Street)*

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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**Driver's License Information**

\_\_\_\_\_  
*(State) (License Number) (Class) (Expiration Date) (Birth Date)*

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**Accident Record**

*(Please list all accidents for the past three years - use separate sheet if more space is needed.)*

*Date      Type (Head-on, Rear-end, Roll-over)      Injuries      Fatalities*

**Last Accident** \_\_\_\_\_

**Next Previous** \_\_\_\_\_

**Next Previous** \_\_\_\_\_

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**Have you ever been charged with driving under the influence (DUI)? If yes, please give full details.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_