

TO: Camp Good Days Employees
FROM: Tamara Federico
SUBJECT: Drivers License and Insurance

Camp Good Days and Special Times, Inc., requires that all individuals that have a driver license, have a license that is in good standing with the issuing jurisdiction. Employees who have a revoked or suspended license and who our insurance carrier deem a potential liability to Camp Good Days may not be employed. The driver license policy will affect all full and part-time employees and is required as part of the employment requirements with Camp Good Days.

Employees and potential employees will be required to provide our Human Resource Director a legible copy of their current drivers license, so that our insurance carrier may review the driving history. Employees who drive their own or another persons vehicle must provide us with a copy of a current and in force insurance card covering that vehicle.

We appreciate your cooperation and assistance in continuing this program. Camp Good Days and Special Times, Inc may not hire individuals who chose not to participate in the Drivers License and Insurance verification Program. Feel free to call me with any questions, concerns or suggestions for conducting this program and you must return a copy of this memo, signed and dated.

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SOCIAL SECURITY NUMBER: ____--____--____

I _____ agree to participate in the Drivers License and Insurance verification Program of Camp Good Days and Special Times, Inc., as part of my employment with Camp Good Days.

SIGNATURE: _____ DATE: _____