



MVR Check Request Best Practices

(January 2009)

1. Keep a copy of all signed MVR request forms locally. It is the responsibility of each District to keep appropriate records. A “template” form is located on the DMI website – Forms section – entitled MVR Record Check.
2. Send ALL requests via e-mail to geri@districtsmutualinsurance.com – any other form of submission will delay the reply to your request.
3. Include the last name of person(s) being requested in the subject line of the e-mail when possible (requests of 4 persons or less).
4. Any request of ten (10) or more persons should be submitted as a spreadsheet or table.
5. Please verify all information is legible, especially if the submittal is handwritten, or if a license has been photocopied or scanned – if there are any questions the request can be subject to delays.
6. Please specify if the request is for a routine operator of a District-owned vehicle (employee – student or otherwise) or for a student (enrolled in a class which requires operation of District owned vehicles) – labeling as either Employee or Student.
7. Please verify all necessary information is complete we are **unable to process the request without the following information**: full name (including middle name), driver’s license number, state of license issuance, and date of birth. If the information provided is incomplete it **CANNOT** be run. Out-of-state MVR check requests can require additional information – DMI will contact you if that is the case. Under **NO** circumstances should social security number information be faxed or e-mailed – if this information is needed DMI will contact your office via telephone.
8. If a student/employee has any questions regarding their acceptability status they should be directed to (or provided a copy of) the DMI Driver Record Evaluation Procedure – found on the DMI website in the Forms section.

If a student/employee desires a copy of their MVR abstract the request must be made in writing to: Districts Mutual Insurance - ATTN: Steven Stoeger-Moore, 212 West Pinehurst Trail, Dakota Dunes, SD 57049

The request needs to contain the following information – full name (of the requestor), driver’s license number, state of license issuance, date of birth, and address where the abstract should be sent . If further clarification is still required please direct them to Geri Justinger via e-mail.