## Please note if you are filling in the form fields using your computer

**Filling in the Form.** Put your cursor in the first field, enter your data, and use the TAB key to advance to the next field or SHIFT-TAB to go to the previous field. Once you have entered data in the last field, you must hit TAB one more time before printing.

**Saving Your Work.** You can fill out the form electronically, but depending on your software/computer you may not be able to save the document with the information you have entered. If that is the case, be sure to print out the completed form before exiting the document.

**Memory Cache.** The information you have entered on the form may persist for a while before it is cleared from your computer's memory.

GO TO THE NEXT PAGE TO VIEW THE FORM

## UCLA EMPLOYER PULL NOTICE (EPN) PROGRAM ADD, DELETE, UPDATE FORM

<u>Instructions</u>: Complete this form, include a photocopy of the employee's driver's license and mail it marked "Confidential" to the appropriate DMV Pull liaison office for your department (Campus: Transportation, Attn: DSC, 555 Westwood Plaza, mail code 136208; Medical Center: Medical Center Human Resources, 924 Westwood Blvd., Suite 200, mail code 166446; UCLA Police Department, 601 Westwood Plaza, mail code 136408).

## (Type or print legibly in ink)

Please complete all sections below for enrollment in the EPN Program

Add to Pull Notice System		Delete from Pull Notice System		
Change Department	From	Recharge ID:		Dept. Code:
	То	Recharge ID:		Dept. Code:
Employee Information				
Name of Employee:	(First)	(Middle)		(Last)
Driver's License Number:_			e:	DOB
Class of License:	Endorsement:	Mee	dical Card Exp	o. Date:
University ID:	Title Code :	Payroll	Title:	
**(	Include a photocopy of th	ne employee's dri	iver's license) <sup>;</sup>	**
Department Information				
Department:			Dept. Code:	
Department Address:			Mail Code: _	
Department Contact Name	e:	Phone #:_		_Fax #
Department Recharge ID:	Recharg	e Acct./Fund:		
PO #	Exp. Da	ate:		
Manager/Supervisor Name	e:			
Manager/Supervisor Signa	ature:		Dat	e:

DSC Coordinator Use Only			
Date addition sent to DMV:	Date deletion sent to DMV:		