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# **Authorized Driver Acknowledgement Form**

In accordance with Clover Park Technical College Transportation Policy 6.25 and the Department of Enterprise Services Policy BR.01.01 Enterprise-Wide Transportation Policy, I, the undersigned, acknowledge that on the date indicated below, I reviewed the College Transportation Policy and agree to comply with the requirements established in that policy. I further agree to immediately inform my supervisor should my license be revoked or suspended for any reason. I understand that any behavior not adhering to these policies may result in disciplinary action by the College per RCW 43.19.635.

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Driver’s Printed Name

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

Driver’s Signature Date

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Department