

Authorized Driver Acknowledgement Form

In accordance with the Department of Enterprise Services [Policy No. BR.01.01 Enterprise-Wide Transportation Policy](#), I, the undersigned, acknowledge that on the date indicated below I reviewed, at a minimum, State Driver Responsibilities and State Driver Standards in the Enterprise-Wide Transportation Policy and agree to comply with the requirements established in the policy. I will immediately inform my supervisor should my license be revoked or suspended for any reason. I understand that any behavior not adhering to the Enterprise-Wide Transportation Policy will result in disciplinary action by my agency per [RCW 43.19.635 Motor vehicle transportation service—Unauthorized use of state vehicles—Procedure—Disciplinary action](#).

Important:

- In order to drive 12 or 15 passenger vehicles, driver must also review and sign the “Safe van driving practices acknowledgement statement” prior to operation.
- Maintain this acknowledgement form in the employee’s file.

Office or Department: [Click or tap here to enter text.](#) Date: [Click or tap to enter a date.](#)

Driver's Printed Name: [Click or tap here to enter text.](#)

Driver’s Signature _____