

Office of Insurance and Risk Management

Acknowledgement and Verification for University and Privately Owned Vehicles

I hereby acknowledge that I have read and understand the policies and procedures outlined in the **University and Private Vehicle Policy**.

I, the undersigned, further agree to comply with these policies and procedures as set forth in the **University and Private Vehicle Policy**. Failure to comply with these policies and procedures could result in the loss of my privilege to operate a university or private vehicle while on official state business.

This verification is freely and voluntarily disclosed.	
Signature:	_ Date:
Print Name:	_

Note: Please keep a copy of this form in your files.