

**Valdosta State University Golf Cart/Utility Vehicle Safety
Guidelines Acknowledgement Form**

Employee Name (print): _____

ID Number: _____

Department: _____ Phone: _____

By signing below I acknowledge that: (please check all that apply)

_____ I have read and understand the Golf Cart/Utility Vehicle Safety Guidelines

_____ I understand the hazards associated with driving a Golf Cart/Utility Vehicle and agree to abide by the safety guidelines.

_____ I have been provided with the opportunity to ask questions related to these guidelines.

Employee Signature

Date

Supervisor Signature

Date

The completed form is to be kept on file by the supervisor.

✓ **Copy of Valid Driver's License.**