



**HR Policy 6.3, Employee Driving Policy and
APR 307, City Vehicle Fleet Safety Policy
Acknowledgment Form
Driving as an Essential Function of the Job**

Please read the HR Policy 6.3, Employee Driving Policy and Administrative Policy 307, City Vehicle Fleet Safety Policy.

I have read the City of Ann Arbor’s HR Policy 6.3, Employee Driving Policy and Administrative Policy 307, City Vehicle Fleet Safety Policy and understand the contents. I understand that my driver’s license number will be checked periodically by Michigan’s Driving Record Subscription Service, or any appropriate reporting service if the license is not issued by the State of Michigan. (The Driving Record Subscription Service provides an organization with the driving record of their employees on an annual basis; or whenever there are any violations, restrictions, suspensions, or revocations posted to the record.)

The City of Ann Arbor, Human Resource Services will be notified by the Driving Record Subscription Service of any moving vehicle violations that result in points accrued or license suspension on my record. For jobs that require a CDL, driving records will be pulled on an annual basis by Human Resource Services.

I understand that because of the nature of my current position, driving is an essential function of my job. I also understand that should my license be suspended; I will be placed on unpaid leave pending an investigation by Human Resource Services.

I understand that my operation of a vehicle while on City of Ann Arbor business requires me to maintain an acceptable standard of proficiency and safety and that I am required to participate in the Distracted Driver Training Course.

I will notify Human Resources Services immediately if my driver’s license is physically lost, revoked, suspended, not renewed for any reason. I also understand that if I am ticketed for a moving violation, it is my responsibility to read and follow all instructions located on the ticket.

Failure to report such loss, revocation, suspension, or non-renewal to Human Resource Services may result in severe disciplinary action up to and including discharge.

A copy of this form will go into your HR file.

Signature of Employee: _____ **Date:** _____

Information to be Filled Out by Employee:

Full Name (Last, First, Middle):			
Service Unit:	Date of Birth:	State of Issuing License:	
Driver’s License Number:	Issue Date:	Exp. Date:	

Office Use Only:

Employee Type: <input type="checkbox"/> Regular <input type="checkbox"/> Regular – CDL <input type="checkbox"/> Temporary <input type="checkbox"/> Temporary – CDL			Date of Hire:
OK to Drive? Y / N	Date Checked:	HRSP Pre-Employment Verified (if applicable): Y / N	
Date Entered “Type 3” in MDOS:		Date Entered as Essential in UltiPro:	