



**TO: All Drivers of University of Maryland Vehicles**

Attachments:

1. University of Maryland Baltimore Fleet Safety & Fleet Administration Procedures. These procedures derived from the Department of Budget & Management Policies & Procedures as delegated by the University System of Maryland.
2. General Rules for Drivers of State Owned Vehicles as promulgated by the Department of Budget Management and adopted by the University System of Maryland. This includes revised guidelines for fueling a state vehicle.
3. Rules for Occupant Restraint Devices (Seat Belts) as promulgated by the Department of Budget and Management and adopted by the University System of Maryland.

Drivers are required to carefully read all the rules, sign the Acknowledgement at the bottom of this page, make a copy of their driver’s license and return to: Environmental Health and Safety, Risk Management Division, 714 W. Lombard Street, Baltimore, MD 21201 or by email [EHSRiskManagement@umaryland.edu](mailto:EHSRiskManagement@umaryland.edu). University of Maryland Baltimore vehicles shall be operated only by drivers who have signed this Acknowledgement and included on the University of Maryland Baltimore list of Authorized Drivers. Supervisor signature is required.

**ACKNOWLEDGEMENT OF RULES FOR AUTHORIZED DRIVERS**

The undersigned certifies that he/she has read the University of Maryland Baltimore policies and procedures listed above.

I am aware that a violation of these rules would be just cause for disciplinary action under State law and University personnel policies.

PRINT NAME: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

LOCATION: \_\_\_\_\_

PHONE #: \_\_\_\_\_

DRIVER LICENCE CLASSIFICATION: \_\_\_\_\_

DRIVER’S LICENSE NO: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

Employee

PRINT NAME (Supervisor): \_\_\_\_\_

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_ PHONE: \_\_\_\_\_

Supervisor