

# VALID DRIVING LICENSE SELF-CERTIFICATION

I, \_\_\_\_\_, do hereby certify  
**Employee/Volunteer Name**

that by presenting **the attached photocopy of my drivers' license**, such license is my only State issued drivers license,<sup>1</sup> that such is valid and is not revoked, suspended, canceled or otherwise disqualified in any way that would prohibit my lawful operation of a motor vehicle.

I understand that I am required to report to my supervisor as soon as possible, but no later than the next business day, any traffic incident, violation, citation, charge, arrest, warrant, or civil action that a reasonable person would expect to result in the revocation, suspension, cancellation or otherwise disqualification of a valid drivers' license.

I understand that I am required to report to my supervisor as soon as possible, but no later than the next business day, any use of controlled substances or intoxicating beverages, any driving impairment resulting from prescription drug use, and illness, or medical condition, or any other factor that may impair concentration, motor skills or reaction time in operating a motor vehicle.

I understand that my failure to accurately report to my supervisor in a timely manner the above required information may subject me to the consideration of appropriate disciplinary action.

I understand and accept that the NPS reserves the right to obtain copies of my certified driving record without my knowledge or consent and at any time the NPS determines such record should be obtained.

\_\_\_\_\_  
**Employee/Volunteer Signature**

\_\_\_\_\_  
**Date**

<sup>1</sup> Photocopies of all additional drivers' licenses must be attached and shall be certified.