



UNIVERSITY OF  
SOUTH ALABAMA

**Low-Speed Vehicle  
Golf Cart, Utility and All-Terrain Vehicle Policy  
Policy Acknowledgment Form**

Operator Name (print): \_\_\_\_\_

\*Department/Contractor \_\_\_\_\_

Building/Address \_\_\_\_\_

Phone# \_\_\_\_\_ Supervisor(print) \_\_\_\_\_

I acknowledge that:

I have read the University Policy for Golf Cart, Utility and All-Terrain  
Vehicles. (Low-Speed Vehicles)

I understand the Policy and associated requirement

I possess a valid driver's license for automobiles.

I have completed training on: \_\_\_\_\_

Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Department and or Contractor maintains this record for three years. Please  
send a copy to the Safety and Environmental Office, or fax # 460-7278.