



**ACKNOWLEDGEMENT OF RESPONSIBILITY TO
MAINTAIN CURRENT LICENSE, CERTIFICATION OR REGISTRATION**

NAME: _____

JOB TITLE: _____

TYPE OF REQUIRED LICENSE: _____

CERTIFICATE OR REGISTRATION: _____

EXPIRATION DATE: _____

I understand that it is my responsibility to obtain and maintain a current license, certificate or registration when necessary or appropriate. I understand that I am to advise my supervisor or human resources office of any problem encountered regarding my license, certificate or registration. I further understand that failure to maintain a current license, certificate or registration will result in separation from employment.

Signature of Employee

Date