

GEORGIA DEPARTMENT OF HUMAN RESOURCES

ACKNOWLEDGEMENT OF RESPONSIBILITY TO
MAINTAIN CURRENT LICENSE, CERTIFICATE OR REGISTRATION

NAME: _____

DHR ORGANIZATIONAL UNIT: _____

JOB TITLE: _____

TYPE OF REQUIRED LICENSE/CERTIFICATE/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 resource/personnel 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

c: Supervisory File
Other Appropriate Files