



RECEIPT OF POLICIES AND EMPLOYEE DUTY TO REVIEW ESD 105 POLICIES:

Whether you are new to the Educational Service District 105 (ESD 105) Agency, or have been here many years, we are pleased to place several key policies in one convenient location: ESD 105 Policy Manual <https://www.esd105.org/about-us/human-resources>

It is our hope that providing this resource to you will serve to facilitate good communication regarding your work environment. The Policy Manual you have received is not a 'comprehensive' statement of every possible policy, nor does it address every possible employment situation or scenario. It is intended to be a guide and a reference tool. Please read through your copy. Your supervisor, the Director of Human Resources, and the Superintendent are available to discuss questions you may have. Thank you, in advance, for reading and following the guidelines in the Policy Manual.

Receipt/Acknowledgement of Educational Service District 105 Policy Manual

I hereby acknowledge that I received a copy of the Educational Service District 105 (ESD 105) Policy Manual. I understand that the primary purpose of it is to encourage good communication between the Agency and its employees, and that this Policy Manual does not modify my 'at-will' employment relationship with the Agency.

I further acknowledge that I understand the importance of immediately reviewing this manual. I am aware that ESD 105 desires a work-place environment free of violence, harassment, disparagement of other employees or any form of unlawful discrimination or other offensive conduct. I acknowledge my duty to review the anti-harassment and anti-discrimination policies within the manual and that if I have concerns or questions about harassment or discrimination I may contact my immediate supervisor, the Director of Human Resources or the Superintendent.

I HAVE RECEIVED A COPY AND/OR HAVE ACCESS TO AN ELECTRONIC VERSION OF THE EDUCATIONAL SERVICE DISTRICT 105 POLICY MANUAL AND I ACKNOWLEDGE MY RESPONSIBILITY TO PROMPTLY REVIEW IT.

FULL NAME (print) _____

Department: _____

POSITION/TITLE: _____

Signature

Date