

Town of Wappinger
Policy Acknowledgment Form

I hereby acknowledge that I received a copy of the Town's Workplace Violence Prevention Program manual outlining the Town's policy, objectives, procedures, and regulations regarding violence in the workplace. I further acknowledge that I have read or will read the contents of the program manual and will contact my Department Head or Human Resources with any questions.

I understand that the objectives, procedures and regulations in this program manual will remain in effect unless I am notified of changes.

I understand that the Town reserves the right to interpret, add to, or revise any part of this program manual, consistent with statutory requirements. Moreover, this program manual may be subject to alteration by changes in federal or state legislation, rules, and/or regulations.

I agree to abide by the Town's Workplace Violence Prevention Program's policies and procedures.

EMPLOYEE NAME (PLEASE PRINT)

EMPLOYEE SIGNATURE

DATE OF SIGNATURE

A copy of this form is to be placed in the employee's personnel file.