**Employee Acknowledgment of Policy Change**

I acknowledge that I have received notification of the following employee handbook policy change:

Policy Name:

Revision Date:

I acknowledge that I have received and reviewed the revised policy. I understand that I should consult my supervisor regarding any questions I may have. I also understand that this policy may be revised at any time, and that all handbook policies are subject to revision, except for the policy on at-will employment, which may be modified only by a signed, written agreement between the President and the employee at issue. I realize that I will receive notification whenever there is a policy change.

Employee Signature:

Date:

Printed Name: