

**Employee Policies and Procedures Manual**  
**Acknowledgement and Receipt**

I understand that I have received a copy of the Company's "Employee Policies and Procedures Manual" and I am responsible for reading each section as listed: Re-Assignment, Employee Accident and Injury Procedures, Title VII of Civil Rights Act of 1964 Consent Form, Discrimination and Harassment Policy, Substance Abuse Policy, Mutual Agreement to Arbitrate, Employee Deduction Authorization, Safety Practices.

By signing below, I acknowledge that I have received, read, understand and agree to comply with all the Company's Policies and Procedures. I also acknowledge that I have read and understand all of the Safety Policies and I agree to abide by these policies. If I have not complied with the procedures and policies as described, I agree to hold the Company harmless for injuries that I may sustain as a result of such actions. I also agree to immediately report, in writing, any discrepancies in practices or conditions directly to my immediate onsite supervisor/ manager.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date