



- ☐ **Anaheim Main Campus:** 1126 N. Brookhurst St., Anaheim, CA 92801-1701
Tel: 714-533-1495 **Fax:** 714-533-6040
- ☐ **Los Angeles Campus:** 2727 W. 6th St., Los Angeles, CA 90057-3139
Tel: 213-738-0712 **Fax:** 213-480-1332

ACKNOWLEDGMENT OF RECEIPT OF EMPLOYEE MANUAL & CONTENTS

The Employee Manual contains important information about SBU, and I understand that I should consult the Human Resources Manager regarding any questions not answered in the Manual. I have entered into my employment relationship with the Company voluntarily, and understand that there is no specified length of employment. Accordingly, either the Company or I can terminate the relationship at will, at any time, with or without cause, and with or without advance notice.

Since the information, policies, and benefits described herein are subject to change at any time, acknowledge that revisions to the manual may occur, except to the Company's policy of employment-at-will. All such changes will generally be communicated through official notices, and I understand that revised information may supersede, modify, or eliminate existing policies.

I accept the terms of the manual. I also understand that it is my responsibility to comply with the policies contained in this manual, and any revisions made to it. I further agree that if I remain with the Company following any modifications to the manual, I thereby accept and agree to such changes. Furthermore, I understand that this handbook is neither a contract of employment nor a legally-binding agreement.

By entering my initials below, I acknowledge that the Employee Manual includes the important information listed below and it is my responsibility to read it.

Worker's Compensation Information *initial* _____

Drug & Alcohol Abuse Policy *initial* _____

Sexual Harassment Policy *initial* _____

I have received a copy of the company's Employee Manual. I understand that I am expected to read the entire manual. Additionally, I will sign the two copies of this Acknowledgment of Receipt, retain one copy for myself, and return one copy to SBU. I understand that this form will be retained in my personnel file.

Signature of Employee

Date

Employee's Name - Printed

++ Please return this form to SBU Personnel Director ++