



**STATEMENT OF ACKNOWLEDGEMENT
NIPISSING UNIVERSITY POLICIES**

I _____ (print full name), hereby acknowledge that I have read and understand the following Nipissing University policies:

- Health & Safety Policy
- Respectful Workplace & Learning Environments Policy
- Workplace Violence & Prevention Policy
- Disconnecting From Work Policy
- Electronic Monitoring Policy
- Employment Accommodation Policy

I, understand that any Health & Safety emergencies that require immediate response should be reported to 911.

I, understand that all concerns outlined in the policies should be reported directly to a supervisor/department head. If uncomfortable in approaching your supervisor/department, contact Human Resources.

I, understand that if I have any questions about the information provided to me, I may contact my supervisor at Nipissing University or the Human Resources Department.

Signature

Date