

SEXUAL MISCONDUCT POLICY ACKNOWLEDGMENT RECEIPT

I acknowledge that I have received the Policy on Sexual Misconduct. I understand that it is my responsibility to be familiar with and conform to the procedures contained in this policy. I am expected to abide by the rules and requirements contained in the policy with regard to the reporting of sexual misconduct, including the obligation to report violations of the policy and not to retaliate against anyone for exercising his/her rights under this policy.

Printed Name

Signature

Date