

ANTI-DISCRIMINATION AND HARASSMENT POLICY ACKNOWLEDGMENT RECEIPT

I acknowledge that I have received the Policy on Anti-Discrimination and Harassment. 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 discrimination and harassment, 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