

Acknowledgment Of Receipt Of The Safety Policy And The Employee Handbook

I have read the safety policy and agree to abide by all of these rules. I understand if I violate any of the safety rules, I will be subject to disciplinary action, including possible termination.

I also acknowledge that I have received my copy of the Employee Handbook for RPM & Associates, Inc., and that I will familiarize myself with its contents. I understand that this Handbook represents only current policies, regulations, and benefits, and that it does not create a contract of employment. Except as set forth below, RPM & Associates, Inc. retains the right to change these policies, regulations, and benefits, as it deems advisable.

To view the Employee Manual and Safety Policy Visit our website www.rpmassociatesinc.net
Or click the following links: Employee Manual Safety Policy

I UNDERSTAND THAT I HAVE THE RIGHT TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE, AND THAT RPM & ASSOCIATES, INC. HAS A SIMILAR RIGHT. I FURTHER UNDERSTAND THAT MY STATUS AS AN "AT WILL EMPLOYEE" MAY NOT BE CHANGED EXCEPT IN WRITING, SIGNED BY THE PRESIDENT OF THE COMPANY.

PRINT FULL NAME:	
SIGNED:	DATE:
SUPERINTENDENT THAT REVIEWED EMPLOYEE:	MANUAL AND SAFETY POLICY WITH
Superintendent – Print Name	Superintendent - Signature
DATE:	