



COMPLIANCE ACKNOWLEDGMENT

As of the date set forth below:

I have been provided with the opportunity to take all meal or rest breaks to which I am entitled and have not been pressured to miss or discouraged from taking any meal or rest breaks.

I have not worked any time "off the clock" and have reported all hours worked, including overtime, on my time card.

I have not been instructed to violate any agency policy or procedure.

I am in compliance with all agency safety regulations and am unaware of any safety issues.

I have no unreported claims for any work-related injury.

I have not been subjected to any unreported violation of agency policies, including but not limited to policies on harassment, discrimination and retaliation.

I have no unreported claims for violation of any agency policy or procedure.

I submit the following for the consideration on agency management (use this as an opportunity for suggestions, safety issues, ways in which we can improve, complaints to management and/or grievances, or any other matter you would like to bring to the attention of management. Attach additional pages as necessary.

Employee Signature: _____

Employee Name Printed: _____

Date: _____