



State of Connecticut
Department of Rehabilitation Services
Human Resources

Acknowledgement of Receipt

I, _____, acknowledge receipt of the
(Please print or type full name)

following Department of Rehabilitation Services (DORS) and/or State of Connecticut policies/procedures:

- DORS Employee Attendance and Dependability Policy and Guidelines
- DORS Notification Procedure for absences/delays
- DORS Code of Ethics policy which incorporates the Office of State Ethic's Guide to the Code of Ethics for Public Officials and State Employees.
- DORS Violence in the Workplace Prevention policy
- State of Connecticut Acceptable Use of State Systems Policy
- State of Connecticut Disposition of Public Records
- State of Connecticut Drug Free Workplace Policy
- State of Connecticut Electronic Monitoring Notice
- State of Connecticut Policy on Security for Mobile Computing and Storage Devices
- Affirmative Action Policy
- Sexual Harassment Prevention Policy
- Discrimination Complaint Process
- Americans with Disabilities Communication Policy

I understand and agree that, as a public employee, I must use my best efforts to comply with the standards set forth within the policies/procedures.

Employee Signature

Date