



## Acknowledgment of Receipt

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The employee handbook describes important information about NCYF and I understand that I should consult the Human Resources Department in regarding any questions not answered in the handbook. I have entered into my employment relationship with voluntarily and acknowledge that there is no specified length of employment. Accordingly, either I or NCYF can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law. Since the information, policies and benefits described here are necessarily subject to change, I acknowledge that revisions to the handbook may occur, with or without notice. Such changes may modify, supersede or eliminate the policies in the handbook. Further, I acknowledge that this handbook is not a contract of employment or a guarantee of employment. I have received the handbook, and I understand that this is my responsibility to read and comply with the policies contained in this handbook and any revisions made to it.

I have received, read, understood and agree to abide by this policy as a job requirement.

Handbook Version:           HBK-2023-02          

\_\_\_\_\_  
Employee Name (please print)

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date Received