

**Certificate of Receipt**

Your signature below indicates your receipt of Department of Human Resource Management Policy No. 1.60, Standards of Conduct. Your signature only acknowledges that you have received and read these policies (or had them read to you). Your signature does not imply agreement or disagreement with the policy itself. If you refuse to sign this certificate of receipt, your supervisor will be asked to initial this form indicating that a copy has been given to you.

Employee's Name (please print): \_\_\_\_\_

Employee's Signature: \_\_\_\_\_

Date \_\_\_\_\_