

Receipt of Employee Handbook

I acknowledge that I have received a copy of CAPSA's Employee Handbook. I agree to read it thoroughly, including the statements in the foreword describing the purpose and effect of the Handbook. I agree that if there is any policy or provision in the Handbook that I do not understand, I will seek clarification from the Human Resources Director. I understand that this Handbook states CAPSA policies and practices in effect on the date of publication. I understand that nothing contained in the Handbook may be construed as creating a promise of future benefits or a binding contract with CAPSA for benefits or for any other purpose. I also understand that these policies and procedures are continually evaluated and may be amended, modified or terminated at any time.

By signing this receipt and returning it to the Human Resource Director, I acknowledge that I have received a copy of CAPSA's Employee Handbook.

Date: _____

Signature: _____

Print Name: _____