

**EMPLOYEE HANDBOOK RECEIPT
2018-2019**

NAME: _____

CAMPUS/DEPARTMENT: _____

I hereby acknowledge receipt of the Burkburnett ISD Employee Handbook. I agree to read the handbook and abide by the standards, policies, and procedures defined or referenced in this document.

Employees have the option of receiving the handbook in electronic format or hard copy.

Please indicate your choice by checking the appropriate box below:

- I choose to receive the employee handbook in electronic format and accept responsibility for accessing according to the instructions provided.
- I choose to receive a hard copy of the employee handbook

If you choose to receive a hard copy, please see your campus administrator.

The information in this handbook is subject to change. I understand that changes in district policies may supersede, modify, or render obsolete the information summarized in this booklet. As the district provides updated policy information, I accept responsibility for reading and abiding by the changes.

I understand that no modifications to contractual relationships or alterations of at-will employment relationships are intended by this handbook.

I understand that I have an obligation to inform my supervisor or department head of any changes in personal information, such as phone number, address, etc. I also accept responsibility for contacting my supervisor or the Human Resource Department if I have questions or concerns or need further information.

Signature of Employee

Date

Please sign and date this receipt and forward to your campus secretary or supervisor.