

Fountain of Hope Family Services Inc.

10326 Greenbrier Parkway
Oklahoma City, Ok 73159

Acknowledgement of Receipt of the Employee Hand Book

The personnel handbook describes important information about **FOHFS** and I understand that I should consult the **Executive Director** regarding any questions not answered in the handbook.

Since the information, policies, and benefits described herein are necessarily subject to change, I acknowledge that revisions to the personnel handbook may occur. All such changes will be communicated through **official notices** and I understand that revised information may supersede, modify, or eliminate existing policies.

Furthermore, I acknowledge that this handbook is not a contract of employment. I have received the personnel handbook and I understand that it is my responsibility to read and comply with the policies contained in this personnel handbook.

Employee Name Printed

Employee Signature

Date