

ACKNOWLEDGMENT

Each employee will be asked to sign a letter of acknowledgment indicating that they have received, read and understand all policies of New Hampshire Association for the Blind as indicated in this handbook. The acknowledgement letter will read as follows:

I have received a copy of the New Hampshire Association for the Blind Employee Handbook, and have reviewed it and had the opportunity to ask my supervisor questions about it. I understand the policies described in the Handbook and agree to abide by them.

I understand that this Handbook does not represent a contract of employment, but rather serves as a guideline. I acknowledge that no representative of the New Hampshire Association for the Blind has promised me employment for any definite period of time, and that no one is authorized to make such promises to me unless they are in writing, and signed by the President. I understand that as an employee of the New Hampshire Association for the Blind I am employed at will, meaning that either I or the New Hampshire Association for the Blind may terminate my employment at any time, with or without cause.

I understand that this Employee Handbook, and the policies and benefits described in it, may be changed from time to time, with or without advance notice, at the discretion of the New Hampshire Association for the Blind.

Printed Name of Employee

Employee Signature

Date