



Acknowledgement of Athens State University Policies

My signature below acknowledges my understanding that I am subject to all terms and conditions of employment as set forth in Athens State University policies. My signature also acknowledges my willingness to review and abide by ALL policies and procedures of the University.

In addition, I acknowledge the availability of all policies for review online in the Athens State University Policy Library at www.athens.edu/policy. I further understand that the University reserves the right to modify its policies at any time and that the most up-to-date policy will appear in the online Policy Library.

Name (Please print clearly): _____

Department: _____

Signature: _____

Date: _____