FACULTY ACKNOWLEDGEMENT

My signature below acknowledges that I received instructions on how to access human resources policies. These policies are on the website www.fit.edu/hr/policies and available through the human resources department. I understand it is my responsibility to access the policies, which describe important information about the university, and understand that I should consult the human resources department if I have questions.

I understand that the university may change, modify, suspend, interpret or cancel, in whole or part, any of the published or unpublished personnel policies or practices, with or without notice, at its sole discretion, without giving cause or justification to any employee. Such revised information may supersede, modify or eliminate existing policies. Any written or oral statement by a supervisor or department director contrary to the personnel policies is invalid and should not be relied upon by any employee.

I understand and agree that I am responsible to read and comply with the policies contained on the human resources website.

Name (please print) ___________________________________________ Date __________________

Signature ___________________________________________________