



RECEIPT FOR EMPLOYEE HANDBOOK

I acknowledge that the Bernards Township Employee Handbook is posted on www.bernards.org on the Human Resources Department tab or that I may request a copy of it. It is updated on an annual basis and is available to me on both the Bernards Township Website and Employee Intranet Site.

I understand that I am responsible for adhering to the policies and procedures in the most current Handbook. I agree that if there is any policy or provision in the Handbook that I do not understand, I will seek clarification from the Human Resources Department.

I understand that the purpose of this Handbook is to inform me about the Township's current policies and procedures, and that nothing in this Handbook constitutes an employment contract or agreement to maintain any current level of benefit. I further understand that this Handbook is meant as a guideline only and does not create a promise of future benefits or a binding contract with Bernards Township for any purpose. I also understand that these policies and procedures are continually evaluated and may be amended, modified or terminated at any time with or without prior notice to me.

I understand that Bernards Township is an "at will" employer and as such, unless I am covered by a collective bargaining agreement or other statutory protection, employment with the Township is not for a fixed term or definite period and may be terminated at the will of either party, with or without cause, and without prior notice. No Supervisor or other representative of the Township, with the exception of the Township Committee in writing and in compliance with law, has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the above.

I understand that if I am covered by a collective negotiations agreement, the terms of that agreement will govern when in conflict with the provisions herein.

I understand that this Handbook contains the Township's Drug and Alcohol testing policy, which I am subject to, as with all of the Township policies.

Please sign and date this receipt and return it to the Human Resources Office.

Date: _____

Signature: _____

Print Name: _____

Department: _____