The information contained in the Fairfield County Personnel Policy Manual, which can be found on the Fairfield County Intranet and may be accessed at www.co.fairfield.oh.us/intranet/, under the Human Resource tab, has been prepared as an aid and guideline to give you a better understanding of your job with the County, and to further give you a summary of the benefits and personnel policies and procedures of the County. It contains information about those things which are expected of you during your employment.

The policies and statements contained in the Personnel Policy Manual, and any other provisions that may be added from time to time, are in no way intended and shall not be construed as any type of employment guarantee or employment contract regarding benefits, terms and conditions. Although the Personnel Policy Manual reflects current policy, these policies may be changed from time to time.

I, _____________________________________, have reviewed the revised Fairfield County Personnel Policy effective February 23, 2016 which includes policies on:

| Unlawful Harassment and Discrimination | Computer Smartphone and Information Systems Usage |
| Safety, Accident, and Bureau of Workers’ Compensation | Fraud Reporting Due to Violation or Misuse of Public Resources and Whistleblower Protection |

I have read, understand, and agree to abide by the rules, regulations, responsibilities, policies and procedures contained within the revised Fairfield County Personnel Policy Manual.

I further understand that The Fairfield County Board of Commissioners reserves the right to change, amend, and supplement the policies set forth in the Personnel Policy Manual with or without notice, and that changes can be either oral or in writing.

If my Elected Official or Department Head has adopted policies that differ from those contained in the County Personnel Policy Manual, the department specific policies shall supersede the County policies.

____________________________________________  ____________________
Employee’s Signature                     Date

____________________________________________  ____________________
Witness’ Signature                        Date