

Frankfort Square Park District COVID-19 Staff Manual

Acknowledgement Form

I acknowledge having received and read a copy of the COVID-19 Staff Manual, and agree to abide by its contents. I further agree to contact my supervisor if I do not understand or have any questions about the COVID-19 Staff Manual, and understand that policies and statements may change from time to time, and that updates will be made available to me.

Employee's Name (please print)

Employee's Signature:

Date: