

SIGNATURE PAGE FOR RECEIPT OF  
EMPLOYEE HANDBOOK

I, \_\_\_\_\_, acknowledge notification of revisions to the  
Employee Handbook authorized by my Appointing Authority on \_\_\_\_\_  
effective \_\_\_\_\_. I acknowledge that I am responsible for  
knowing the contents of this revised Employee Handbook.

Access to the Employee Handbook is available through the Wood County employee website,  
[www.co.wood.oh.us/employee](http://www.co.wood.oh.us/employee) under the Policy link. A Revision Summary, included in the  
Employee Handbook, identifies the major changes.

I understand that this Handbook is not meant to imply a permanent contract of employment, but  
rather has been put together to provide basic information to the employee. It may be altered as  
laws and County policies and procedures change.

Employee Signature \_\_\_\_\_ Date: \_\_\_\_\_

Witness Signature \_\_\_\_\_ Date: \_\_\_\_\_