## EMPLOYEE ACKNOWLEDGMENT OF MANUAL

## (City Officers & Non-Union Sworn Officers)

I have received a copy of the City of De Pere Employee Policy Manual. I have read and I understand its contents. I acknowledge that it is my responsibility to ask questions about anything I do not understand.

I understand that it is my responsibility to comply with all City policies, rules and expectations as set forth in this Manual, as well as policies, rules and expectations that the City may otherwise establish or change from time to time. I further understand and acknowledge that this Manual provides guidelines and information, but this Manual is not, nor is it intended to constitute, an employment contract of any kind. I cannot enter into any agreement or contract by acknowledging receipt of this Manual or by following any of the provisions of this Manual.

## **City Officers**

I understand that my position is defined as a City Officer as noted in § 10-5, De Pere Municipal Code or Wis. Stat. § 62.09. I understand my position is appointed by the Mayor and confirmed by the Council and that my removal from the position is governed by Wis. Stats §17.12.

EMPLOYEE SIGNATURE	DATE
Print Name & Department	POLICY MANUAL REVISION DATE (date on the front cover of the policy manual)
to a pre-disciplinary or post-disciplinary head in the contents of this Manu	a Non-Union Sworn Employee who may be entitled aring pursuant to Wis. Stat. § 62.13(5). ual may be changed by the City at any time, with or may appeal the imposition of discipline through the
EMPLOYEE SIGNATURE	DATE
Print Name & Department	POLICY MANUAL REVISION DATE

Return completed form to your supervisor.