



Family Court of Delaware Policy Acknowledgement Form

- ☐ a) Judicial Branch Personnel Rules
- ☐ b) Tobacco-free Workplace (#11-007)
- ☐ c) State of Delaware Drug-free Workplace
- ☐ d) Dress Code (#18-003)
- ☐ e) Violence in the Workplace (AD #95.02)
- ☐ f) State of Delaware Workplace Violence
- ☐ g) Domestic Violence in Workplace (#10-007)
- ☐ h) Sexual Harassment Prevention (#10-002)
- ☐ i) Branch Closures & Emergency Closures (AD #185)
- ☐ j) Cell Phone Authorization (#13-004)

I hereby acknowledge that I have been given a copy of the above listed policies and have read them. I further acknowledge that I understand and agree to comply with all the terms and conditions of employment as stated in each of the policies listed above and others that were provided to me.

After signing, this document must be reviewed and signed by the designated agency HR staff at the time you submit all required new hire documentation.

Employee Printed Name

Employee Signature

Date

HR Staff Printed Name

HR Staff Signature

Date