

By signing my name below, I am acknowledging that I have reviewed the Orientation PowerPoint, Orientation package and the following Health PEI policies. Any questions concerning these policies have been discussed with my manager. My signature also certifies my understanding of and agreement with the following policies:

- Confidentiality
- IT Acceptable Use Policy
- Employee Development and Appraisals
- Conflict of Interest
- Attendance Support and Management Policy
- Social Media Policy
- Personal Wireless Communication Device Usage
- Drug, Alcohol and Medication Policy
- Respectful Workplace
- Immunization Policy

Employee Name

Date

Please return to the Human Resources prior to start date.