

**EMPLOYEE HANDBOOK RECEIPT**

**2010-\*\*\*\***

**Name:** \_\_\_\_\_

**Employee Number:** \_\_\_\_\_

**Campus/department:** \_\_\_\_\_

I hereby acknowledge receipt of my personal copy of the Irving ISD Classified Personnel Handbook. I have read and understand the handbook and agree to abide by its standards, policies, and procedures as defined or referenced in this document.

The information in this handbook is subject to change. I understand that the changes in district policy may supersede, modify, or eliminate the information summarized in this book. As the District provides updated policy information, I accept the responsibility for reading and abiding by the changes.

I understand that no modifications to contractual relationships or alterations of at-will relationships are intended by this handbook.

I understand that I have an obligation to inform my supervisor or department head of any changes in personal information, such as address, phone number, etc. I also accept responsibility for contacting my supervisor if I have questions or concerns or need further explanation.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**CQ (LOCAL)  
EXHIBIT**

**Irving ISD Network (I-Net) Agreement**

\_\_\_\_\_  
Employee Name (print)

**School/Location**

I have read the District I-Net Acceptable Use Guidelines. I agree to follow the rules contained in these guidelines. I understand that if I violate the rules I will lose my access privilege to the I-Net and may face other disciplinary action.

\_\_\_\_\_  
Employee Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Phone

**Note: Please sign and date this acknowledgement form and return to your supervisor. Both the handbook receipt form and the Irving ISD Network Agreement should be signed.**