

**POLICY MANUAL RECEIPT ACKNOWLEDGMENT**

I have received my copy of the *The Education Cooperative's* Personnel Policy Manual.

It is my responsibility to read and understand the matters set forth in this manual; it is a guide to firm policies and procedures.

I understand that no statement contained in this manual creates any guarantee of continued employment or creates any obligation, contractual or otherwise, on the part of The Education Cooperative.

I will rely on any promises, statements or representations to the contrary only if they are in writing and signed by the Executive Director.

I understand and acknowledge that The Education Cooperative has the right, without prior notice, to modify, amend or terminate policies, practices, benefit plans, and other institutional programs within the limits and requirements imposed by law.

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

Print Name: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_.

THIS FORM SHOULD BE RETURNED, WITHIN SEVEN (7) DAYS OF RECEIPT TO:

HR Coordinator  
P.O. Box 186  
1112 High Street  
Dedham, MA 02027

Fax: 781-251-0692

**THIS POLICY MANUAL HAS BEEN WRITTEN TO PROVIDE INFORMATION AND GUIDANCE FOR OUR EMPLOYEES. TEC RESERVES THE RIGHT TO CHANGE, ADD TO OR DELETE ANY OF THE PROVISIONS IN THIS MANUAL AT ANY TIME. THIS MANUAL IS NOT A CONTRACT. ALL EMPLOYMENT WITH THE ORGANIZATION IS ON AN AT-WILL BASIS. AS SUCH, YOU OR THE ORGANIZATION MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME AND FOR ANY REASON. IT IS EXPECTED THAT EMPLOYEES PROVIDE A THIRTY (30) DAY NOTICE TO MINIMIZE DISRUPTION IN STUDENT SERVICES.**