Employee Acknowledgement of Personnel Policies

I acknowledge that I have been informed that I may access Personnel Policies on the County Website.

https://www.fluvannacounty.org/policyprocedure/page/02-personnel-policies

I understand that the Personnel Policies describe important information about Fluvanna County and understand that I should consult my supervisor or Human Resources if I have questions.

Since the information, policies, and benefits described are necessarily subject to change, I acknowledge that revisions to the Manual may occur. I understand that the Fluvanna County may change, modify, suspend, interpret or cancel, in whole or part, any of the published or unpublished personnel policies or practices, with or without notice, at its sole discretion, without giving cause or justification to any employee. Such revised information may supersede, modify or eliminate existing policies. The Fluvanna County's Board of Supervisors shall have sole authority to add, delete or adopt revisions to the policies. Any written or oral statement by a supervisor, County Administrator, department director or agency head contrary to the personnel policies is invalid and should not be relied upon by any employee.

I understand and agree that I will read and comply with the policies posted on the website and any revisions, am bound by the provisions contained therein, and that my continued employment may be contingent on following those policies.		
Employee Name	Signature	Date