## ACCEPTANCE AND ACKNOWLEDGEMENT

## EMAIL AND INTERNET POLICY ACKNOWLEDGMENT FORM

- I, as an employee, accept & acknowledge that I have read, understood & received the TRISHUL's E-Mail
  and Internet Policy. I agree to have read it thoroughly and also clarified any confusion or
  misunderstanding by authorized Trishul Employee or Owner.
- I, as an employee, understand that my use of a company's E-mail system constitutes my consent to all the terms and conditions of that policy.
- In particular, I understand that (1) the E-mail system and all information transmitted by, received from, or stored in that system are the property of **TRISHUL**, (2) the system is to be used only for business purposes and not for personal purposes, and (3) I have no expectation of privacy in connection with the use of the E-mail system, internet or with the transmission, receipt, or storage of information in that system.
- I, as an employee, agree not to use a code, access a file, or retrieve stored communications unless authorized.
- I, as an employee, acknowledge and consent to **TRISHUL** monitoring my use of the E-mail system and the Internet at any time at its discretion, including printing and reading all E-mails entering, leaving, or stored in the system.

Print Name:	Employee #
Signature:	Date:
COMPANY TELEPHONE AND PERSONAL MOBILE	E PHONE USE
Because a large percentage of our business is conducte a professional telephone manner. Although TRISHUL re may need to use the telephone for personal reasons, personal mobile phones during regular business hours all personal communication will be kept to off hours and	ealizes that there are times when an employee it is expected that employees will not use their without permission from a supervisor, and that
Print Name:	Employee #
Signature:	Date:
FINAL PAYCHECK ACKNOWLEDGMENT	
<ul> <li>Any employee who is leaving TRISHUL must return all corporate credit cards, computer(s), phone(s) etc., before paycheck will be mailed during the next normal pay pe the final paycheck will reflect the appropriate deductions.</li> </ul>	e their final paycheck can be issued. This final eriod. If there are unpaid obligations to <b>TRISHUL</b> ,
I, as an employee, understand, accept & acknowledge these	conditions.
Print Name:	Employee #
Signature:	Date:
Please sign and date this receipt and return it to your recr	uiter / manager / supervisor / TRISHUL.

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## EMPLOYEE SICK LEAVE POLICY ACKNOWLEDGMENT

I, as an employee, accept & acknowledge that I have read, understand & received a copy of TRISHUL's
Employee Sick Leave Policy. I agree to have read it thoroughly and also clarified any confusion or
misunderstanding by authorized Trishul Employee or Owner.

I. as an employee, agree to follow employee sick leave policy and procedure.

I, as an employee, agree to follow employee sick leaves	ve policy and procedure.
Print Name:	Employee #
Signature:	Date:
EMPLOYEE ATTENDANCE POLICY ACKNOWL	EDGMENT
Print Name:	Employee #
Signature:	Date:
<ul> <li>effect of the Handbook.</li> <li>agree that if there is any policy or provision in clarification from my recruiter / manager / supervise.</li> <li>understand that TRISHUL is an "at will" employed a fixed term or definite period and may be terminand without prior notice.</li> <li>understand that this Handbook states TRISHUL publication.</li> <li>understand that nothing contained in the Handbook benefits or a binding contract with TRISHUL for</li> </ul>	ments in the foreword describing the purpose and the Handbook that I do not understand, I will seek sor / TRISHUL.  er and as such employment with <b>TRISHUL</b> is not for ated at the will of either party, with or without cause,  L's policies and practices in effect on the date of book may be construed as creating a promise of future
Print Name:	Employee #
Signature:	Date:

Please sign and date this receipt and return it to your recruiter / manager / supervisor / TRISHUL.

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## IMMEDIATE DISMISSALS/MISCONDUCT ACKNOWLEDGMENT

• I, as an employee, accept & acknowledge that I have read, understood & received a copy of **TRISHUL**'s immediate Dismissals / Misconduct Policy. I agree to have read it thoroughly and also clarified any confusion or misunderstanding by authorized Trishul Employee or Owner.

• I, as an employee, agree to follow employee sick leave policy and procedure.

Print Name:	Employee #
Signature:	Date:
TELEPHONE MONITORING EMPLOYEE ACKN	NOWLEDGMENT
I, as an employee, accept & acknowledge receipt of this N of telephone calls may be conducted from time to time I and other business purposes.	
Print Name:	Employee #
Signature:	Date:

Please sign and date this receipt and return it to your recruiter / manager / supervisor / TRISHUL.

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