



ACKNOWLEDGMENT OF RECEIPT
OF
SEXUAL HARASSMENT POLICY
ADMINISTRATIVE DIRECTIVE NO. 323

I have received a copy of the City of Hamilton’s Sexual Harassment Policy and understand that harassment/discrimination, including sexual harassment, in the workplace is illegal and against City policy. I understand it is my responsibility to read and comply with this policy. Any violation of this policy **will not be tolerated** and will result in disciplinary action, up to and including dismissal.

I understand if I am being harassed, that I should report the harassment for investigation as set forth in this Directive. I understand that I am responsible for reporting any harassment/discrimination claims to my non-involved immediate supervisor or to Department Director, Chief, Law Director, or a staff member in the Civil Service and Personnel Department, Human Resources Department, or City Manager’s Office as I choose.

Retaliation against employees who report harassment or discrimination claims and those who assist in an investigation will not be tolerated.

Employee Printed Name: _____ Date: _____

Employee Signature: _____