



Donnelly College

ACKNOWLEDGMENT OF REVIEW & UNDERSTANDING
Of the Donnelly FACULTY HANDBOOK CONTENTS

I acknowledge that I have reviewed and that I agree to the terms in the Donnelly College Faculty Handbook.

By signing below, I acknowledge that I have read these Policies and Procedures and understand that these Policies and Procedures apply to my employment at Donnelly College. I also understand my responsibilities and the college expectations of me as they pertain to my employment. I understand that I am responsible for complying with these Policies and Procedures and failure to comply may result in disciplinary action up to and including termination of employment.

I understand that Donnelly College and the Academic Affairs Office reserve the right to change, interpret, withdraw, or add to any of its policies, procedures, benefits, or terms of employment at its discretion and without prior notice to employees.

Faculty Employee Signature

Date

Department Director Signature

Date