

**Cape Cod Collaborative
Employee Handbook
Signature Page**

- I have completed the Commonwealth of Massachusetts Ethics Training on-line and have provided a copy of the acknowledgement for my file.
- I agree to allow the Cape Cod Collaborative to perform a CORI/SORI (background check) at least annually or as requested.
- I understand the physical requirements of the job (refer to Job Descriptions) and state that I have no physical or mental impairment that would interfere with my ability to perform my responsibilities.
- I have read and understand the Harassment in the Workplace Policy.
- By signing below I acknowledge that I have read and understand the handbook policies and agree, as a condition of employment, to adhere to the Cape Cod Collaborative's Rules and Regulations.

Employee Signature: _____ **Date:** _____