

# General Handbook Acknowledgment

This Employee Handbook is an important document intended to help you become acquainted with Meade County. This document is intended to provide guidelines and general descriptions only; it is not the final word in all cases. Individual circumstances may call for individual attention.

Because Meade County's operations may change, the contents of this handbook may be changed at any time, with or without notice, in an individual case or generally, at the sole discretion of management.

Please read the following statements and sign below to indicate your receipt and acknowledgment of this Employee Handbook.

**I have received and read a copy of Meade County's Employee Handbook. I understand that the policies, rules and benefits described in it are subject to change at the sole discretion of Meade County at any time.**

**I further understand that my employment is terminable at will, either by myself or Meade County, with or without cause or notice, regardless of the length of my employment or the granting of benefits of any kind.**

**I understand that no contract of employment other than "at will" has been expressed or implied, and that no circumstances arising out of my employment will alter my "at will" status except an express written agreement signed by the County Commission. This handbook is subject to the terms of any applicable collective bargaining agreement. I understand that my signature below indicates that I have read and understand the above statements and that I have received a copy of the Meade County's Employee Handbook.**

Employee's Printed Name: \_\_\_\_\_ Position: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The signed original copy of this acknowledgment should be given to Human Resources Office - it will be filed in your personnel file.

## Receipt of Sexual Harassment Policy

It is Meade County's policy to prohibit harassment of any employee by any supervisor or employee on the basis of sex or gender. The purpose of this policy is not to regulate personal morality within the workplace. It is to ensure that all employees are free from sexual harassment.

While it is not easy to define precisely what types of conduct could constitute sexual harassment, examples of prohibited behavior include unwelcome sexual advances; requests for sexual favors; obscene gestures; displaying sexually graphic magazines, calendars or posters; sending sexually explicit e-mails; text messages; and other verbal or physical conduct of a sexual nature, such as uninvited touching of a sexual nature, or sexually-related comments.

Depending upon the circumstances, improper conduct also can include sexual joking; vulgar or offensive conversation or jokes; commenting about an employee's physical appearance; conversation about your own or someone else's sex life, or teasing or other conduct directed toward a person because of his or her gender which is sufficiently severe or pervasive to create an unprofessional and hostile working environment.

If you feel that you have been subjected to conduct which violates this policy, you should immediately report the matter to your supervisor. If you are unable for any reason to contact this person, or if you have not received a satisfactory response within five (5) business days after reporting any incident of what you perceive to be harassment, please contact the HR Office.

Every report of perceived harassment will be fully investigated, and corrective action will be taken where appropriate. Violation of this policy will result in disciplinary action, up to and including discharge. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed. In addition, Meade County will not allow any form of retaliation against individuals who report unwelcome conduct to our management team or who cooperate in the investigations of such reports in accordance with this policy.

Employees who make complaints in bad faith may be subject to disciplinary action, up to and including discharge.

I have read and I understand Meade County's Sexual Harassment Policy.

Employee's Printed Name: \_\_\_\_\_ Position: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The signed original copy of this receipt should be given to the Human Resources Office - it will be filed in your personnel file.

## Receipt of Non-Harassment Policy

It is Meade County's policy to prohibit intentional and unintentional harassment of any individual by another person on the basis of any protected classification including, but not limited to, race, color, national origin, disability, religion, marital status, gender, sexual orientation, participation or non-participation in labor unions, or age. The purpose of this policy is not to regulate our employees' personal morality, but to ensure that in the workplace, no one harasses another individual.

If you feel that you have been subjected to conduct which violates this policy, you should immediately report the matter to your Supervisor. If you are unable for any reason to contact this person, or if you have not received a satisfactory response within five (5) business days after reporting any incident of what you perceive to be harassment, please contact the HR Office.

Every report of perceived harassment will be fully investigated and corrective action will be taken where appropriate. Violation of this policy will result in disciplinary action, up to and including discharge. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed. In addition, Meade County will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy.

Employees who make complaints in bad faith may be subject to disciplinary action, up to and including discharge.

Employee's Printed Name: \_\_\_\_\_ Position: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The signed original copy of this receipt should be given to the Human Resources Office - it will be filed in your personnel file.

# Employee Confidentiality Agreement

An employee will perform services for Meade County which may require the County to disclose confidential and proprietary information to the employee. For the purposes of this agreement, "confidential information" is any information of any kind, nature or description concerning any matters affecting or relating to the employee's services for Meade County, the business or operations thereof, and/or the products, drawings, plans, processes or any other data of the County. Accordingly, to protect the County and the confidential information that will be disclosed to the employee, the employee agrees to the following points:

- The employee will hold the confidential information received from the County in strict confidence and shall exercise a reasonable degree of care to prevent disclosure to others.
- The employee will not disclose or divulge either directly or indirectly the confidential information to others unless first authorized to do so in writing by the County.
- The employee will not reproduce the confidential information nor use this information commercially or for any purpose other than the performance of their duties for the County.
- The employee will, upon the request or upon termination of their relationship with the County, deliver to the County any drawings, notes, documents, equipment and materials received from the County or originating from its activities for the County.
- Meade County shall have the sole right to determine the treatment of any information that is received from the employee, regardless of whether said information is project-specific or part of the normal duties of the employee. The County may follow any procedure it may deem appropriate for the information.
- Meade County reserves the right to take disciplinary action, up to and including termination, for violations of this agreement.

The employee represent and warrants that they are not under any preexisting obligations inconsistent with the provisions of this agreement. Signing below signifies that the employee agrees to the terms and conditions of the agreement stated above.

Employee's Printed Name: \_\_\_\_\_ Position: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The signed original copy of this agreement should be given to the Human Resources Office - it will be filed in your personnel file.