



Acknowledgement of the Cold Spring Harbor Laboratory:

Computer Systems User Agreement

Workplace Safety and Prohibition of Weapons Policy

Cell Phone Use Policy

I have received and read the aforementioned policies and agree to follow all of the terms and procedures that are set forth therein. I am aware that violations of the above mentioned policies may subject me to disciplinary action, up to and including termination. I also understand that these policies may be amended by the Laboratory at any time and I will be notified of any such changes.

I further understand that Laboratory policies, including the aforementioned policies, can be found on the CSHL internal website, under Human Resources Policies. I may also obtain a copy of these policies in the Human Resources department.

I have read and accept the terms of all of these policies.

Employee Name: _____
Please Print

Signature: _____

Date: _____