



**STATEMENT OF ACKNOWLEDGEMENT  
NIPISSING UNIVERSITY HEALTH & SAFETY POLICIES**

I \_\_\_\_\_ (print full name), hereby acknowledge that I have read and understand the following Nipissing University Health & Safety policies:

- Health & Safety Statement Policy
- Respectful Workplace & Learning Environments Policy
- Workplace Violence Prevention Policy

I, understand that any Health & Safety emergencies that require immediate response should be reported to 911.

I, understand that all concerns outlined in the policies should be reported directly to a supervisor/department head. If uncomfortable in approaching your supervisor/department, contact Human Resources.

I, understand that if I have any questions about the information provided to me, I may contact my supervisor at Nipissing University or the Human Resources Department.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date