



**PERSONNEL POLICIES & PROCEDURES MANUAL SUMMARY  
SHEET SIGN-OFF**

I, \_\_\_\_\_, have received the New Castle County Personnel Policies & Procedures Manual Summary Sheet. I am aware that it is my responsibility to review and become familiar with all NCC policies and as updates and new policies become available to update my own resource when applicable.

**Note to Employee: This form should be signed, witnessed, and will be retained for placement in your personnel file. Please remember to update your personnel policy binder as necessary.**

\_\_\_\_\_  
**Signature of Employee**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Witness**

\_\_\_\_\_  
**Date**

**cc: Personnel File**