Sexual Harassment Policy Certification of Receipt

I hereby certify that I have received, read, and understand the Sexual Harassment Policy of William Carey University as stated in the William Carey University employee handbooks.

Initial ________

Acceptable Use Policy Certification of Receipt

I hereby certify that I have received, read, and understand the Acceptable Use Policy of William Carey University.

Initial ________

Identity Theft Prevention Policy Certification of Receipt

I hereby certify that I have received, read, and understood the Identity Theft Prevention Policy of William Carey University and that I have received and reviewed the training materials referenced in section C.2 of the policy.

Initial ________

_____________________________
Print Name

_____________________________
Signature

_____________________________
Date

Please return this form to:

Office of the President
William Carey University
Box 1, 498 Tuscan Avenue
Hattiesburg, MS  39401