



Employee & Safety Handbook Acknowledgement

I have read and been informed about the content, requirements, and expectations of Adventure Nursing from the Employee & Safety Handbook. I have received a copy of the Employee & Safety Handbook and I agree to abide by the policy guidelines as a condition of my employment and my continuing employment at Adventure Nursing. I understand and acknowledge that information may be changed and added to the Handbook at any time, in which case an updated version will be sent to me.

I understand that if I have questions, at any time, regarding the policies set forth by Adventure Nursing, I will consult with my recruiter.

Please read the Employee & Safety Handbook carefully to ensure that you understand the enclosed information before signing this document.

Employee Printed Name _____

Employee Signature _____ Date _____