

# Employee Handbook Receipt

I hereby acknowledge receipt of a copy of the Hudson ISD Employee Handbook. I agree to read the handbook and abide by the standards, policies, and procedures defined or referenced in this document.

Employees have the option of receiving the handbook in electronic format or hard copy.

***The Hudson ISD Employee Handbook can be viewed online at [www.hudsonisd.org](http://www.hudsonisd.org).***

Please indicate your choice by checking the appropriate box below:

- I choose to receive the employee handbook in electronic format and accept responsibility for accessing it according to the instructions provided.
- I choose to receive a hard copy of the employee handbook.

The information in this handbook is subject to change. I understand that changes in district policies may supersede, modify, or render obsolete the information summarized in this book. As the district provides updated policy information, I accept responsibility for reading and abiding by the changes.

I understand that no modifications to contractual relationships or alterations of at-will employment relationships are intended by this handbook.

I understand that I have an obligation to inform my supervisor or department head of any changes in personal information such as phone number, address, etc. I also accept responsibility for contacting my supervisor or the Human Resources Department located at the Administration Office if I have questions or concerns or need further explanation.

Please sign and date this receipt and forward it to The Human Resources Office located at the Administration Office.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee's Name (Print)

\_\_\_\_\_  
Campus/Department

# Authorization for Release/Closure of Personal Information

The Texas Public Information Act allows employees, officials and former employees and officials to elect whether to keep personal information confidential. Unless you choose to keep it confidential, the following information may be subject to public release if requested under the Texas Public Information Act. Therefore, please indicate whether you wish to allow public release of the following information.

## Allow Public Access

Home Address	No _____	Yes _____
Personal E-Mail Address	No _____	Yes _____
Home Phone Number	No _____	Yes _____
Personal Cell Phone Number	No _____	Yes _____
Emergency Contact Information	No _____	Yes _____
Information that reveals whether you have family members	No _____	Yes _____

Employee Signature \_\_\_\_\_

Date \_\_\_\_\_

# Employee User Agreement—District Network and Internet Resources

I have read the Network and Internet Use policy [[CQ \(LOCAL\)](#)] available on the district's web site at the address listed at the bottom of the page and understand the conditions for use of the network and Internet resources provided by the HUDSON ISD for the purpose of promoting educational excellence and supporting instructional goals.

By my signature below, I agree that any use of the network and Internet under my user ID or account will be consistent with that policy. I understand that district employees have the authority to and will monitor network usage, including electronic messages sent and received to ensure compliance with the policy. Furthermore, I understand that I am responsible for any transactions that occur under my user ID or account and that any violation of the district's policy will be considered misconduct and a violation of the employee standards of conduct.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee's Name, Printed

\_\_\_\_\_  
Campus