

I understand that the **First Choice Staff Member Handbook** refers to current benefit plans and policies maintained by the company and that I must refer to the actual plan documents and summary plan descriptions as well as specific polices since these documents are most detailed and may be updated from time to time.

I have read and understand the Vacation Policy within section three (3) in this Staff Member Handbook.

Initials _____ Date _____

I also understand that if a written contract or policy is inconsistent with the Staff Member Handbook, the written contract is controlling.

If I have questions regarding the content or interpretation of this Staff Member Handbook I will confirm with Shawn Kirk or a designee of his choice.

Finally, I understand my employment with First Choice is at-will.

NAME _____
PRINT NAME

DATE _____

STAFF MEMBER
SIGNATURE _____