Employee Policy Attestation

Inclusion and Anti-Discrimination/Anti-Harassment

Instructions: After reading your company's policy on anti-discrimination and anti-harassment, complete this form and return it to your Supervisor or Manager.

I _____ (print name) hereby attest that I understand and acknowledge that my employer is an inclusive and anti-discriminatory business. My employer hires and serves without discrimination or harassment.

After reviewing the Anti-Discrimination and Anti-Harassment Policy, I understand and acknowledge that any violation of this Policy may be grounds for disciplinary action, up to and including immediate termination, and I agree to comply with this Policy.

My employer has chosen to demonstrate its commitment to anti-discrimination and anti-harassment by joining Liberty Locator. As part of Liberty Locator's initiative through my employer, I will not discriminate against or harass individuals for ANY reason, regardless of my personal beliefs or any implicit/explicit bias. Additionally, as part of Liberty Locator's initiative, I will comply with the U.S. Equal Employment Opportunity Commission's guidelines on anti-discrimination. [1]:

_____ _____

Employee Signature Date

Note to Managers: Please retain in your employee files. Do not send copy to Liberty Locator.

[1] U.S. Equal Employment Opportunity Commission at https://www.eeoc.gov/youth/what-employment-discrimination#:~:text=The%20laws%20enforced%20by%20EEOC,older)%2C%20or%20genetic%20information.