

## **Sexual Harassment Policies Acknowledgement of Receipt**

**I acknowledge that I have received a copy of the following University Policies in reference to Sexual Harassment. I understand that as an employee of the University of Maryland, Baltimore, it is my responsibility to comply with these policies:**

- VI. 1.20 University of Maryland System Policy on Sexual Harassment**
- VI. 1.20 (A) UMB Policy on Sexual Harassment of Employees**
- VI. 1.20 (B) UMB Policy on Sexual Harassment of Students**

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

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Employee Name (Printed)**

\_\_\_\_\_  
**EmplID or Social Security Number**