

# Westmoreland County Juvenile Services Center

## Confirmation of Receipt: Zero Tolerance for Sexual Abuse and Harassment

Please initial the statements below and sign as an acknowledgement of receipt and understanding of the information presented to you.

\_\_\_\_\_ I have received the pamphlet entitled "Zero Tolerance for Sexual Abuse and Harassment for Contracted Employees and Volunteers" of the Westmoreland County Juvenile Services Center.

\_\_\_\_\_ I have read the contents and have had any questions answered.

\_\_\_\_\_ I will ensure that this information will be distributed to all new and existing staff members in my organization and will also ensure all new and existing staff members understand the contents of this pamphlet.

\_\_\_\_\_ I acknowledge that failure to comply with the standards set forth in this pamphlet may result in the loss of contract.

\_\_\_\_\_  
Name of company/contractor

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness