

EMPLOYEE CONFIRMATION FORM

NOTE: Supervisors are to ensure that all employees have been informed of and fully understand all company rules and regulations. After the employee signs below, return this paper to the office.

By signing below, I confirm that I have received the DelliQuadri Landscaping Employee Briefing, that I understood everything, and that I have had an opportunity to discuss any questions with my supervisor.

I understand that any infraction of the company's rules and regulations may make me subject to disciplinary action, up to and including termination.

I understand that the briefing is for my information and does not constitute an employment contract or guarantee of continued employment and my employment may be terminated by myself or by the Company at any time.

Signature: _____

Date: _____

Print: _____