

Handbook Acknowledgment and Receipt

The handbook provided describes important information about HCC Network, and I understand that I should consult my Preceptor or the HR Assistant regarding any questions not answered in the handbook. I have entered into my internship/clinical training program relationship with HCC Network voluntarily and acknowledge that there is a specified length for which I will be training at HCC Network that has been determined between HCC Network and myself. **Accordingly, either I or HCC Network can terminate the relationship at will, with or without cause, at any time, so long as there is not violation of applicable federal or state law.**

This handbook and the policies and procedures contained herein supersede any and all prior practices, oral or written representations, or statements regarding the terms and conditions of my training with HCC Network. By distributing this handbook, the organization expressly revokes any and all previous policies and procedures that are inconsistent with those contained herein.

I understand that any and all policies and practices may be changed at any time by HCC Network, and the organization reserves the right to change my hours and working conditions at any time. All such changes will be communicated through official notices, and I understand that revised information may supersede, modify or eliminate existing policies. Only the CEO or Chief Administrative Officer of HCC Network has the ability to adopt any revisions to the policies in this handbook.

Furthermore, I acknowledge that this handbook is neither a contract of employment nor a legal document. I understand and agree that my training affiliation may be terminated with or without cause and with or without notice at any time by HCC Network or myself.

I have received the handbook, and I understand that it is my responsibility to read and comply with the policies contained in this handbook and any revisions made to it.

Student's Signature

Student's Name (Print)

Date

