

Weslaco Independent School District Employee Handbook Receipt 2018-2019 School Year

Official Name: _____ Last 4 digits of SSN / Employee ID#: _____
(Please Print; DO NOT USE NICKNAMES – USE YOUR OFFICIAL NAME AS NOTED IN OUR SYSTEM)

Campus/Department: _____ Current Position: _____

Employees have the option of receiving the handbook in hard copy format (to be provided by the campus/department secretary) or electronic format. The directions for accessing the electronic format are as follows:



- Go to our website www.wisd.us
- Go to Departments & Select Human Resources
- Download the WISD Employee Handbook



Please indicate your choice by checking the appropriate box below:

- I choose to receive the employee handbook in electronic format and accept responsibility for accessing according to the instructions provided.

- I choose to receive a hard copy of the employee handbook.

I hereby acknowledge receipt of my personal copy of the Weslaco ISD Employee Handbook. I agree to read the handbook and abide by the standards, policies, and procedures defined or referenced in this document.

The information in this handbook is subject to change. I understand that changes in district policies may supersede, modify, or render obsolete the information summarized in this booklet. As the district provides updated policy information, I accept responsibility for reading and abiding by the changes.

I understand that no modifications to contractual relationships or alterations of at-will employment relationships are intended by this handbook.

I understand that I have an obligation to inform the Human Resources Dept. of any changes in personal information, such as phone number, address, etc. I also accept responsibility for contacting my immediate supervisor within three calendar days of any arrest, indictment, conviction, no contest or guilty plea, or other adjudication for any felony, any offense involving moral turpitude, and any other offense as outlined in Board Policy DH (LOCAL): Employee Standards of Conduct.

By signing this document, employees acknowledge that they have access to, and have read and understand, the most recent school district policies related to appropriate use of the electronic communications and data management systems, specifically CQR (local and legal). This document becomes an extension of the acceptable use policy already on file in the employee's personnel file.

Signature

Date



Please sign both copies of this form you have been given and keep one. Note: A copy will be kept at the campus/department and the original form will be forwarded to the Human Resources Department.