

VERIFICATION OF RECEIPT OF EMPLOYEE PERSONNEL POLICIES AND
BENEFITS MANUAL OF THE DIOCESE OF FORT WAYNE-SOUTH BEND, INC.

By signing below, I acknowledge that I have received a copy of and agree to abide by the Employee Personnel Policies and Benefits Manual of the Diocese of Fort Wayne-South Bend, Inc. I understand that I have been given this Manual for information purposes only and that the Manual does not create an express or implied employment contract of any kind. I understand that the policies and other information referenced in the Manual are subject to change or deletion at the Diocese's discretion. I also understand that I am not required to work for the Diocese of Fort Wayne-South Bend, Inc. for any set period of time and that the Diocese is not required to employ me for any set period of time. I or the Diocese may terminate the employment relationship for any reason at any time.

Employee Signature

Date