

## VIDEO SURVIELLENCE POLICY ACKNOWLEDGEMENT

I, \_\_\_\_\_\_ acknowledge receiving, reading, and understanding Adjoin's policy on video surveillance. I agree to comply with the policy as outlined.

Furthermore, I have been notified of the video surveillance at the following worksite(s):

Worksite Address: \_\_\_\_\_

Camera Location(s): \_\_\_\_\_

I understand that if I have any questions regarding this policy, I may contact my supervisor or the HR department.

Employee Signature

Date