

ABUSE / NEGLECT PROCEDURE SIGN OFF SHEET RULE 50

I have received and reviewed EP!C's procedures for reporting known or suspected incidents of Abuse or Neglect. I hereby acknowledge that all of my questions and concerns have been answered.

Characteristics (Control of Control of Contr	**************************************
Signature of Employee / Volunteer	Date
Printed Name of Employee / Volunteer	ID Number
Signature of Supervisor/Designee	Date

Original to Personnel File

Form 276

Revised: 03/27/07

12/03/07