



**COLSA Corporation  
Employee Handbook  
Acknowledgement Form**

*"Customer satisfaction above all else"*

Document # :

**CC-HB.0001.F001**

Revision # :

Effective Date:

**May 04, 2007**

**General Information:** Complete, sign and return\* this form to the COLSA Human Resources Department at corporate headquarters. The returned signed copy of this record will be stored in the employee's personnel file.

\* Return the completed form by one of the following methods:

Walk-In – Hand deliver to the COLSA Human Resources Department

Fax – (256) 964-5419, ATTN: Human Resources

Interoffice Mail – COLSA Human Resources Department, Benefits Coordinator

E-mail - If you have digital/electronic signature capability, sign and e-mail to [hr@colsa.com](mailto:hr@colsa.com)

E-mail – Print, complete, sign and scan form into a PDF file, e-mail PDF file to [hr@colsa.com](mailto:hr@colsa.com)

I acknowledge that I have received, read, and understand the policies outlined in COLSA Corporation's Employee Handbook. I agree to conform to the rules and regulations of COLSA Corporation as described in the handbook, which is intended as a guide to human resources policies and procedures. I understand that the company has the right to change the handbook with or without notice. It is understood that COLSA's official policies are maintained on the employee website and that future changes in official policies and procedures will supersede or eliminate those found in this handbook, and that employees will be notified of such changes through normal communication channels.

I also understand and agree that the information contained in these materials does not constitute an employment contract between COLSA Corporation and myself, and that either I or COLSA Corporation may terminate our employment relationship at any time, for any reason, or for no reason. I understand that no manager or representative of COLSA Corporation, other than the President of the company, has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

\_\_\_\_\_  
**Employee's Signature**

\_\_\_\_\_  
**Employee Name**  
(Please type or print)

\_\_\_\_\_  
**Date**