

Acknowledgment Forms

Employee Name: _____ Employee ID: _____

By signing below, you are acknowledging that you have received and reviewed the Lee College information on:

[Affordable Care Act Notification](#)

[Annual Alcohol and Drug Free Workplace Notice](#)

[Emergency Notifications](#) – Lee College uses Rebel Alerts, a state-of-art notification system, to provide emergency alerts such as campus closings weather advisories, etc. to employees and students. Follow the instructions to opt in.

[Employee Handbook](#)

[Employee Self-Service](#) – Here you can view your pay stubs, W-2's and update contact information, etc.

[E-Verify Notice](#)

[HIPPA Short Form](#)

[Mandatory Training](#) - As a new employee, federal and state laws mandate that you must complete training for preventing sexual harassment, discrimination, and sexual violence. You will be sent an e-mail from **SafeColleges** with instructions on how to complete your training. Once you receive this e-mail you will have 30 days to complete the training. **If you do not receive the email from Safe Colleges within 7 - 10 working days from your first day of work, contact the HR Office at (281) 425-6875 or hr@lee.edu.**

[Payroll Schedule](#)

[Wellness Center Flyer](#)

[Worker's Compensation – Notice of Injured Employee Rights & Responsibilities \(English\)/Español](#)

Employee Signature: _____

Date: _____