



City of **BROCKTON**
Massachusetts
Mayor Robert F. Sullivan

CITY OF BROCKTON
DEPARTMENT OF HUMAN RESOURCES
45 SCHOOL STREET
BROCKTON, MA
(508) 580-7820

Employee Policy Packet

CORI Policy _____

Domestic Violence Policy _____

Drug and Alcohol Policy _____

Employee Assistance Program _____

Family Medical Leave Policy _____

MA Pregnant Workers Fairness Act _____

Nepotism Policy _____

Sexual Harassment Policy _____

I have read the content, requirements, and expectations of the policies for City of Brockton employees. I have received the following policies and agree to abide by policy guidelines as a condition of my employment and my continuing employment with the City of Brockton.

I understand that if I have questions, at any time, regarding the City of Brockton policies, I will consult with my immediate supervisor or Human Resources.

I also understand, it is my responsibility to read and understand the existing City of Brockton policies and abide by them as a City of Brockton employee.

Please read the above carefully to ensure that you understand before signing this document.

Employee Name (Signature): _____

Employee Name (Print): _____

Date: _____

In receipt, Human Resources designee: _____