



Crisis Management & Communication Plan for  
Sexual Abuse Allegation Acknowledgement Form

This is to acknowledge that I have received a copy of the Crisis Management & Communication Plan for Sexual Abuse Allegation policy. I understand that this policy is a guide and an aid to being an effective employee.

I also understand and agree that it is my responsibility to read and become familiar with contents of this policy.

Date: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Employee Name (Print): \_\_\_\_\_