

**Acknowledgment of Receipt and Understanding
OP-050101 entitled "Procedures in the Event of Job Actions
or Walkouts by Correctional Staff"**

My signature below acknowledges receipt of a copy of the above titled agency Operations Memorandum or Revision with an effective date of _____, and that it is my responsibility to review its contents and comply with any instructions/directives contained therein.

Printed Name

Signature

Six-Digit ODOC Employee ID Number

Date

Please return this completed form to your facility/unit human resources office.

Distribution: Original to personnel file