## NORTHWEST GEORGIA ONCOLOGY CENTERS, P.C. EMPLOYEE MANUAL

## MANAGERS ACKNOWLEDGMENT OF POLICY AGAINST HARASSMENT

As a manager or supervisor, I acknowledge receipt of the attached copy of the Company's "POLICY AGAINST HARASSMENT." I understand the policy applies to managers as well as other employees.

I understand that because I am a member of management I may not date or make sexual advances, welcome or unwelcome, toward any employee. I will conduct myself in accordance with the Company's policies. I will immediately report any act, allegation or rumor of harassment to. I will support appropriate corrective action, including investigation of the claims, and I will not penalize any person who has reported the existence of such improper conduct.

I understand that because I am a manager, the Company can be held responsible for acts of harassment that I commit, condone, tolerate or fail to investigate. Therefore, if I know of or have reason to know of any act of harassment or the existence of a hostile, intimidating or offensive work environment at this Company and I fail to report it to higher management, both the Company and I can be placed in jeopardy.

Finally, I understand that if I violate any aspect of this policy, I will be subject to immediate termination and that I can be sued and held personally liable for my acts or omissions.

Date

Signature of Manager/Supervisor

(Please print name)