

LDH Policy & Procedure Acknowledgement

Employee Name: _____

Full Legal Name *(please print)*

State Civil Service – Prohibited Political Activity (General Circular Number 2012-024)

Civil Service Prohibited Political Activities video -- <https://www.youtube.com/watch?v=ptp1LZ7gBJ0>

LDH – Recoupment of Overpayments (Policy #2.1)

LDH – Disclosure of Outside Employment (Policy #44.1)

LDH – Overtime Policy (Policy #45.1)

LDH – Firearms in the Workplace (Policy #68.1)

LDH – Safety Rules

General Safety/Loss Prevention Manual

LDH – Employee Lactation Support (Policy #104.1)

Notice of Compliance to Employees – Worker’s Compensation

LDH Internet

https://www.youtube.com/watch?v=LvaqkE61_6s&index=4&list=PLDcAvZPgZa6LUuG4wJYsM8AgexsJ__5b4

The online orientation has given me instructions to access the above policies via the LDH Internet Webpage. I have accessed the website, read the above policies, and fully understand them. I also acknowledge that it is my responsibility to familiarize myself with all LDH Policies and that I am responsible for complying with all policies, procedures, and regulations of the Louisiana Department of Health.

Signature

Date