

**Staff Development  
Office of Reentry Services  
SOP Update Signature Sheet**

**RE: Policy Update SOP**\_\_\_\_\_

**Effective Date of Policy**\_\_\_\_\_

In accordance with 107.03 Staff Development/ Counseling Services, I have attended a briefing on the policy updates listed above. My questions have been satisfactorily answered. I understand and acknowledge that it is my responsibility to remain abreast of future Policy Updates as well.

**Staff Signature**\_\_\_\_\_ **Date**\_\_\_\_\_

**Supervisor Signature**\_\_\_\_\_ **Date**\_\_\_\_\_

**CC:**  
**Employee**  
**Management File**  
**Personnel File**