Print Name: LAST FIRST MIDDLE

UTD-ID number: _____

UTD Dept: _____ **Dept Phone: x**_____

CONDITIONS AND REGULATIONS OF EMPLOYMENT FORM

I hereby agree and acknowledge:

1. *That my employment with UT Dallas is subject to all state laws, Regents Rules and Regulations and UT Dallas rules, as amended.*

2. *That I have been furnished copies of, or links to, the following:*
   a. *Extract of Subtitle C, Title 10, Government Code, Standards of Conduct.*
   b. *Excerpt from the General Policy Statement of the Regents Rules on Intellectual Property.*

3. *That I have read, or will read, the documents provided to me by my department, including the EEO Summary and the Sexual Harassment Summary. I know that I can find information about my rights and responsibilities as an employee from my department, the HR Web, or the Office of Human Resources Management.*

SIGNATURE _____

DATE _____

Notice About Information Laws and Practices

With few exceptions, you are entitled on your request to be informed about the information The University of Texas at Dallas collects about you. Under Sections 552.021 and 552.023 of the *Texas Government Code*, you are entitled to receive and review the information. Under Section 559.004 of the *Texas Government Code*, you are entitled to have UTD correct information about you that is held by us and is incorrect, in accordance with the procedures set forth in The University of Texas System Business Procedures Memorandum 32. The information that UTD collects will be retained and maintained as required by Texas records retention laws (Section 441.180 et seq. of the *Texas Government Code*) and rules. Different types of information are kept for different periods of time.

THE UNIVERSITY OF TEXAS AT DALLAS
Office of Human Resources Management
http://www.utdallas.edu/hrm/index.html