



**THE BOSTON
CONSERVATORY**

MUSIC DANCE THEATER

Receipt of Policies Form

DATE: _____

My signature below indicates I have received a copy of The Boston Conservatory “All-Conservatory Harassment Policy” and The Boston Conservatory “Violence in the Workplace Policy”.

Print Name: _____

Signature: _____

Note: This form must be completed annually for your personnel file.

**PLEASE RETURN COMPLETED FORM TO:
ROB ELKIN, DIRECTOR OF HUMAN RESOURCES**