

ETHICS

I certify that I have carefully read and reviewed the content of, and completed the

ETHICS TRAINING FOR EMPLOYEES:

A Northeastern Illinois University Program for New Hires

Furthermore, I certify that I understand my failure to comply with the laws, rules, policies, and procedures referred to within this training course may result in disciplinary action up to and including termination of state employment/appointment, administrative fines, and possible criminal prosecution, depending on the nature of the violation.

Name: _____
(Print: last name, first name, middle initial)

Signature: _____

Today's Date: _____

Date of Birth: _____

Creating an ethical working and learning environment is the responsibility of every employee. This course will explain your obligations under the *State Officials and Employees Ethics Act (Ethics Act)*, as well as review other ethics-related laws, rules, and policies.

To be properly credited for participating in ethics training, please complete and return this original signature page to the Office of Student Employment.