

# City of Muncie Human Resources



Receipt of electronic **AFSCME** Unit Employee Handbook:

**American Federation of State, County and Municipal Employees**

[www.cityofmuncie.com](http://www.cityofmuncie.com)

I will carefully read the electronic Employee Handbook. In consideration for my employment, I agree to abide by all of its rules of conduct, terms and conditions.

I acknowledge that my employment is at will and that the City reserves the right to terminate me at any time with or without cause and with or without notice, as long as there is no violation of applicable federal or state laws. I further understand that the Mayor is the only authorized representation of the city who can modify my at-will employment and that any modification must be in writing and signed by the authorized representative of the city of Muncie to be effective.

Employee Name: \_\_\_\_\_

PRINT

Employee Signature: \_\_\_\_\_

Date: \_\_\_\_\_