

[Date]

[Employee Name]

[Employee ID]

[Department]

## **Subject: Acknowledgment of Risk Management Policies and Procedures**

Dear [Employee Name],

This letter serves to confirm that I have received, read, and understood the [Company Name] Risk Management Plan and associated safety protocols.

By signing this document, I acknowledge the following:

- I have been informed of the potential risks associated with my job responsibilities.
- I agree to comply with all safety guidelines, mitigation strategies, and reporting procedures established by the organization.
- I understand my responsibility to report any new hazards, near-misses, or incidents to my supervisor immediately.
- I have been provided with the necessary training and resources to perform my duties safely.

I understand that adherence to these risk management practices is a condition of my employment and is essential for the safety of myself and my colleagues.

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Employee Signature

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Date

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Supervisor/Manager Signature