

Beaumont Laboratory – Courier Department

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

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

Employee ID#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Beaumont Corporate: <http://employee.beaumont.edu/portal/pls/portal/ip30dev.page_pkg.page?xid=hr_policies>

Courier Department: <http://employee.beaumont.edu/portal/pls/portal/ip30dev.page_pkg.page?xid=lab_couriers>

The above signed employee is able to locate the online Courier Department Policies and Procedures on the Beaumont Health System Intranet.

The above signed employee is able to locate the online Beaumont Corporate Policies and Procedures on the Beaumont Health System Intranet.

The signed above employee has read and understood all the department policies and procedures for the Outreach Courier Department.

This is an annual signoff required for the Courier Department.

Thank you,

Courier Department Management

Department Leadership Signature and Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_