

Attachment B  
Policy No. 601.001

DISCRIMINATION/HARASSMENT-FREE WORKPLACE POLICY  
ACKNOWLEDGMENT FORM

I, \_\_\_\_\_, have received, reviewed and understand the Department of Human Resources Development (DHRD) Policy and Procedure 601.001 Discrimination/Harassment-Free Workplace Policy. I also understand the reporting procedures and am aware that I can report any incidences of discrimination, retaliation and/or harassment based on a protected class that I observe or experience to my manager, the Departmental Human Resources Officer (or his/her designee), the EEO or Civil Rights Compliance Officer, or the Executive Branch Equal Employment Opportunity Office (587-1162 or [eeo@hawaii.gov](mailto:eeo@hawaii.gov)).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date