

Acknowledgement of Mandatory Training

Please complete the mandatory training listed below within the first 30 days of employment. 1. Watch this **Texas Department of State Health Services video on HIV/AIDS and the workplace**. Health and Safety Code Section 85.004. 2. Read the <u>presentation on sensitive personal information and personal health information</u> (SPI/PHI). Tex. Health and Safety Code 181.101 3. Watch this **Texas Attorney General's video on Human Trafficking**. Review the **CAPPS Time & Leave Desk Aid.** 5. Watch the TDI workplace conduct, sexual harassment, and discrimination video and review the course workbook. Tex. Labor Code 21.010. 6. Watch the **Safety & Health Overview video**. Watch the **TDI Security Training Overview video**. I acknowledge that I have completed the following training: HIV/AIDS. Sensitive Personal Information/Personal Health Information (SPI/PHI). Human Trafficking. CAPPS time and leave. Workplace Conduct: sexual harassment and discrimination. Safety & Health Overview. TDI Security Training Overview. I have been informed of TDI's standards of conduct and agree to comply with agency policies. I agree that by

typing or inserting my name in any provided space con same force and effect as my hand-written signature.	stitutes an electronic	or digital signa	ture having the	,
Signature		Date		