**LCI IT** **Orientation Completion Acknowledgement**

By signing this form, I acknowledge that I have attended the IT induction/Training as requested. I also verify that I have reviewed the New Employee Orientation PowerPoint presentation with the IT staff

I understand that if I have questions regarding any of the information or materials provided in the Orientation Presentation, I will contact the IT department

**Employee Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employee Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**