Anti-Discrimination Policy Acknowledgment

Date: _____

Employee Name: _____

Position:	
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Dear [Employee Name],

This letter serves to acknowledge your receipt and understanding of the company's Anti-Discrimination Policy. We are committed to providing a work environment that is free from discrimination and harassment based on race, color, religion, sex, national origin, age, disability, or any other characteristic protected by law.

By signing below, you confirm that you have read and understood the Anti-Discrimination Policy and agree to uphold its principles in the workplace.

Signature: _____

Thank you for your commitment to promoting a respectful and inclusive workplace.

Sincerely,

[Your Name]

[Your Position]

[Company Name]