

Staff Acknowledgment: [COMPANY NAME] AI Use Policy

Policy version: [1.0] · **Effective date:** [DATE]

By signing below, I confirm that:

- ☐ I have received and read the [COMPANY NAME] AI Use Policy, version [1.0].
- ☐ I had the chance to ask questions, and I know who to ask in future: [NAME, JOB TITLE].
- ☐ I will use only the AI tools on the Approved AI Tools Register, signed in with the company account where the register says so.
- ☐ I will never put anything on the policy's "never paste" list into an AI tool, including passwords, payment details, ID numbers, customer records, health information, staff records and confidential information.
- ☐ I will read and check all AI output before I use, send or publish it, and I am responsible for what I send.
- ☐ I will be honest with customers about AI use, as the policy describes.
- ☐ I will report any mistake or problem with an AI tool right away to [NAME] at [PHONE / EMAIL / CHAT].
- ☐ I understand that breaking the policy may lead to [retraining / loss of access / disciplinary action], as section 11 of the policy says.
- ☐ I understand the policy may be updated, and I may be asked to sign a new acknowledgment when it is.

Full name (print) _____

Job title or role _____

Signature _____

Date _____

For the company

Received by (name) _____

Date received _____

Where the signed form is kept _____

Questions about this form? Ask [NAME, JOB TITLE]. This form doesn't change the terms of anyone's employment except as the policy itself says.