



AIA
Bucks County

**AIA BUCKS COUNTY
EXECUTIVE BOARD POLICY ACKNOWLEDGMENT**

I, _____, serving AIA Bucks County in the capacity of _____, acknowledge that I have read, understand and agreement to the terms of the following AIA Bucks County policy statements:

- Conflict of Interest Policy Statement*
- Records Retention Policy Statement*
- Whistleblower Policy Statement*
- Harassment Policy Statement*
- Equity, Diversity and Inclusion (EDI) Statement*

I understand that as a leader of this chapter I have a responsibility to uphold the principles and guidelines outlined in these documents.

(signature)

(printed name)

(position)

Dated: _____