

Remote Work Security Training Consent Form

Employee Information

Name

Email

Position

Department

Training Acknowledgement

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I acknowledge that I have completed the required Remote Work Security Training.

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I understand and agree to adhere to the company's security policies and procedures when working remotely.

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I agree to maintain the confidentiality and security of company data.

Consent

I provide my consent to comply with all guidelines and protocols as outlined in the Remote Work Security Training. I understand that failure to comply may result in disciplinary action.

Signature

Date