

STX Healthcare Management Services

EMPLOYEE HANDBOOK ACKNOWLEDGEMENT FORM

I hereby acknowledge that I have received and read the STX Healthcare Management Services (STX) Employee Handbook, dated March 2013.

I acknowledge that it is my responsibility to read the 2013 Employee Handbook and to seek clarification of any policies and procedures within the 2013 Employee Handbook which I do not understand.

I acknowledge and understand that STX reserves the right to modify this Handbook and amend or terminate any policies, procedures, or employee benefit programs whether or not described in this Handbook at any time.

I acknowledge and understand that this Handbook does not create an employment contract, either implied or expressed, between STX and its employees. I further acknowledge that nothing contained in this handbook should be construed as a promise or guarantee of continued employment or any benefit.

I acknowledge and understand that, unless otherwise provided in a written employment agreement signed by the Chief Executive Officer between STX and an employee, the employment relationship between STX and its employees is "at-will" and may be terminated at any time by either party for any reason or no reason, in accordance with applicable federal and state laws.

I also acknowledge and understand that: (a) STX requires a 90 day introductory period at the beginning of the employee's employment; (b) the 90 day introductory period applies to me as well as other employees; (c) if my employment with STX is terminated (either by STX or me) prior to the end of my 90 day probationary period, I will not be entitled to many of the benefits STX provides to its employees whose employment continues past their initial 90 day introductory period; and (d) unless I have a written employment agreement with STX signed by the Chief Executive Officer which provides otherwise, successful completion of the initial 90 day introductory period does not change the "at-will" nature of my employment relationship with STX.

I ACKNOWLEDGE AND UNDERSTAND THAT ANY PART OF THIS MANUAL WHICH I DO NOT UNDERSTAND WILL BE EXPLAINED TO ME IN SPANISH UPON MY REQUEST.

YO RECONOZCO Y ENTIENDO QUE CUALQUIER PARTE DE ESTE MANUAL QUE NO ENTIENDA SE ME EXPLICARA EN ESPANOL, SEGUN MI PETICION.

PRINT NAME: _____

SIGNATURE: _____

Date: _____