

Statement of Acknowledgment

I hereby acknowledge that I have read and reviewed the provided materials on abuse, neglect, and exploitation as defined by the laws and regulations of the state of Kansas. I understand the definitions, signs, reporting requirements, and the legal consequences related to abuse, neglect, and exploitation.

I recognize my duty and responsibility to protect vulnerable individuals from harm and to report any suspicions or knowledge of abuse, neglect, or exploitation in accordance with Kansas state laws and my organization's policies. I fully comprehend the procedures for reporting such incidents and commit to complying with these obligations to ensure the safety and well-being of those in my care.

Name: _____

Signature: _____

Date: _____