

# **Birdville ISD**

## **Cash Handling**

### **Employee Acknowledgement of Responsibilities**

I hereby acknowledge that I have viewed the BISD Cash Handling Training presentation and that I am responsible for complying with the policies and procedures in place. In particular, I acknowledge that:

1. I have completed the Cash Handling Training and have provided a copy of the certificate with this acknowledgement form to the Secretary.
2. I will secure funds at all times.
3. I understand the district policy regarding receiving, receipting, depositing, and reconciling funds on behalf of students or district.
4. Money collected will be submitted to the campus/department secretary regularly (preferably daily) and in the same form which it was received.
5. Student or district funds will not be co-mingled with personal funds.
6. All purchases made from student or district funds will be made by PO, check or P-Card approved by the Principal or Director prior to purchase.
7. I will report all cases of suspected or actual theft, fraud, misappropriation or corruption of student or district funds.

I understand that I will be held responsible for any district or student funds entrusted to me and that I will reimburse the school for any money which is lost due to carelessness, theft, fraud, or failure on my part to follow established procedures.

\_\_\_\_\_  
Cash Handler/Collector Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Principal/Director

\_\_\_\_\_  
Campus/Department