

## Employee annual review — cash and check handling procedures

| Please maintain this form in the employee's department personnel file.  |                             |
|---|-----------------------------|
| Employee name:  |                             |
| ASU ID number:  |                             |
| The purpose of the annual review is to have the undersigned employee acreviewed all phases of the payment handling process with their supervisor. includes the following:   |                             |
| <ul> <li>Reading and understanding any internal departmental policy manual</li> <li>Reviewing section 300 of the <u>Financial Services manual</u>.</li> <li>Train and receive supervision on the cash register or other machin</li> </ul> | ·                           |
| Signatures  |                             |
| The employee agrees to comply with ASU's payment handling policies and procedures.  |                             |
| Employee's signature  | Date                        |
| I briefed the employee on the basic procedures and believe the employee   | received adequate training. |
| Supervisor's signature  | Date                        |

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