



**There is more to me
than my disability.**
Community Connections

www.CommunityConnectionsCO.org
281 Sawyer Dr., Ste. 200, Durango, CO 81303
Main office phone: 970.259.2464
Main office fax: 970.259.2618
cci@cci-colorado.org

Position Description Acknowledgement Form

I have reviewed and fully understand the position description for (insert position title) _____ . I further understand that I would be responsible for the satisfactory execution of the essential functions described therein, under any and all conditions as described.

I understand that Community Connections, Inc. is an At-Will employer, therefore, employment is not determined by a set period of time. Community Connections, Inc. can change wages, benefits, and conditions of this position at any time.

Applicant Signature

Date

Applicant Name Printed