

(Optional form to be signed if employee so chooses)

STATE OF GEORGIA  
COUNTY OF \_\_\_\_\_

**UNDERSTANDING**

I understand that I am being requested by McIntosh Trail CSB to submit to a polygraph examination as part of an internal investigative procedure arising out of \_\_\_\_\_CHARGE OR INCIDENT\_\_\_\_\_.

I have been advised of the nature of the investigation and of my rights, in connection with this proceeding, under the Constitution of the State of Georgia or under the United States Constitution, or under any state or federal law (including any right against self-incrimination under the Fifth Amendment of the United States Constitution).

While I am aware that refusing to submit to a polygraph examination in connection with the ongoing internal investigation into this matter may result in the initiation of disciplinary proceedings against me, I have been fully advised and I understand that I am not being asked or required as a condition of continuing employment to stipulate that the results of this examination be admissible in my proceeding or hearing, nor am I being asked or required as a condition of continuing employment to waive any right guaranteed to me by the Constitution of the State of Georgia or the Constitution of the United States or any other law.

Having been so advised and fully understanding my rights and options in connection with this matter, I freely and voluntarily agree to submit to a polygraph examination.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Witness