



ATTACHMENT F

NETAPP, INC.

ACKNOWLEDGMENT AGREEMENT OF NETAPP, INC., BENEFITS INELIGIBILITY

This Acknowledgment Agreement of NetApp, Inc., Benefits Ineligibility (“Agreement”) is entered into between NetApp, Inc., a Delaware corporation, with offices located at 495 East Java Drive, Sunnyvale, CA 94089 (“NetApp”), and _____, an individual, hereinafter (“Alternative Worker”). Alternative Worker is on assignment to NetApp through a staffing agency known as **Talent Logic**. (“Staffing Agency”).

Alternative Worker understands and agrees that the assignment to NetApp is conditioned upon acceptance of this Agreement by Alternative Worker for Alternative Worker’s services. In consideration of the payments and benefits offered and made to Alternative Worker by the Staffing Agency, which Alternative Worker accepts as full compensation for employment on assignment to NetApp, Alternative Worker hereby expressly waives any entitlement to any compensation, insurance or benefits of any kind from NetApp and agrees that Alternative Worker will neither participate in nor make any claim from or against any of NetApp’s benefit plans, including but not limited to pension, 401K, profit sharing, stock options, stock purchase, retirement, unemployment insurance, insurance(s), disability, vacation, severance or any other such programs that may be offered by NetApp to its employees. Alternative Worker understands that he/she has induced the Staffing Agency to offer Alternative Worker the employment assignment to NetApp, based upon the Alternative Worker’s knowing and voluntary acceptance of the terms in this Agreement and the terms of any agreement between the Alternative Worker and Staffing Agency not inconsistent herewith, as the complete and total consideration for Alternative Worker’s employment services, with the further understanding that NetApp is relying on these compensation terms as the basis for the Staffing Agency’s financial and contractual arrangements with NetApp.

This Agreement will be governed by the laws of the State of California, excepting its conflicts of law provisions.

Effective Date: _____

Acknowledged and agreed:

Alternative Worker:

Name: _____
(Print)

By: _____
(Signature)

Title: _____

Date: _____