

Millard School District Code of Conduct Staff Member Acknowledgement

Name: _____ Position: _____

Date of Training: _____ Trained by: **Online Video** _____

I received training about the requirements of Millard School District's Staff Conduct Policy #4325. I understand the requirements of the policy and that I am responsible to recognize and maintain appropriate personal boundaries while interacting with students. I also understand that if I have reason to believe a staff member is violating this policy, I will report my suspicions to my supervisor, building administrator, or district administrator.

Signature of Staff Member

Date