



CONDITION OF EMPLOYMENT

Serving Students ■ Supporting Communities ■ Leading Educators

Form with fields for LAST NAME, FIRST NAME, MIDDLE INITIAL, SOCIAL SECURITY NUMBER, and POSITION.

Please read all California Penal and Welfare and Institutions Code Sections stated below.

Table with two columns: CHILD ABUSE REPORTING and REPORTING ABUSE OF DEPENDENT ADULTS. Each column contains detailed text regarding legal sections and reporting requirements.

Pursuant to the requirements of the California Penal law, I have read and do understand the provisions of the Penal and Welfare and Institutions Code Sections as stated herein and will comply with their provisions.

Form with fields for SIGNATURE and DATE SIGNED (MONTH/DAY/YEAR).