



2022/2023 ANNUAL MANDATED NOTIFICATIONS

Please initial:

- _____ [Americans with Disabilities Act](#)
- _____ [Bloodborne Pathogens](#)
- _____ [Child Abuse Reporting](#)
- _____ [Civility Policy](#)
- _____ [Complaints Concerning Instructional Materials](#)
- _____ [Complaints Concerning School Personnel](#)
- _____ [Convicted Sex Offender Information](#)
- _____ [Drug and Alcohol Free Workplace](#)
- _____ [Family and Medical Leave](#)
- _____ [Guidelines for Using Social Networking Sites](#)
- _____ [Hazardous Materials Communication Program](#)
- _____ [Healthy Schools Act of 2000](#)
- _____ [Infectious Disease Control / Universal Precautions](#)
- _____ [Legal Responsibilities of Public Employees](#)
- _____ [On-Line Resources Rules and Regulations](#)
- _____ [Maintaining Appropriate Adult-Student Interactions](#)
- _____ [Professional Learning Community Meeting Time \(*Teachers only*\)](#)
- _____ [Rules of Conduct for Professional Educators \(*Teachers only*\)](#)
- _____ [Safety Practices Safety and Security in the Newhall School District](#)
- _____ [Safety Practices Safety](#)
- _____ [Sexual Harassment / Discriminatory Conduct](#)
- _____ [Tobacco-Free Schools Policy](#)
- _____ [Uniform Complaint Policy](#)
- _____ [Use of Copyright Materials](#)
- _____ [Wellness Policy Guidelines](#)

Your signature on this form certifies that you have reviewed, read and understand all of the above information (available on www.newhallschooldistrict.com) and agree to comply with all responsibilities of employment.

Print Name: _____ Date: _____

Signature: _____

School/Site: _____

Position: _____

Please return signed form to your school office and/or department.