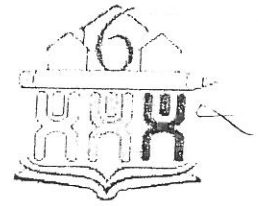


# POLICY 701



*(Policy for the Protection of Pupils in the Public School System from Misconduct  
by Adults – Pupil Protection Policy)*

Enclosed please find information on the revised Policy 701. Each employee in School District 6 is required to review and have knowledge and understanding of this policy.

As a person who has access to pupils within School District 6, you are required to confirm that you have knowledge of this Policy Statement.

Please return this form to Human Resources as soon as possible.

**This is to acknowledge that I have received information on the revised Policy 701 and understand the Policy.**

<b>Volunteer/Casual/Substitute Acknowledgement</b>
Name: _____ (Please Print)
Signature _____
Date: _____

<b>Employee Acknowledgement</b>
Name: _____ (Please Print)
Signature _____
Date: _____