I acknowledge that I have:

1. viewed Pasco County’s Ethical Standards video presentation.

2. received a copy of “The Code of Ethics and the Principles of Professional Conduct of the Education Profession in Florida”.

In addition, I have been provided the opportunity to ask questions about this information and been informed of resources for additional information.

__________________________  ________________________  __________
Principal or Worksite Supervisor          Employee Signature          Date

Completed forms are to be sent to the Office for Human Resources and Educator Quality.