



District School Board of Pasco County
**ETHICAL STANDARDS OVERVIEW
ACKNOWLEDGMENT FORM**

Name: _____ Employee ID: _____

I acknowledge that I:

1. have viewed Pasco County's Ethical Standards podcast and had the opportunity to ask questions about the information presented.
 2. was provided instruction to locate "The Code of Ethics and the Principles of Professional Conduct of the Education Profession in Florida" posted online.
 3. understand that additional resources regarding Pasco County's Ethical Standards are available.
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Employee Signature

Date

Principal or Worksite Supervisor Signature

Date

