

ACTION H-6

NORFOLK PUBLIC SCHOOLS
NORFOLK, NEBRASKA

ACKNOWLEDGEMENT FORM

I HAVE RECEIVED A COPY OF AND UNDERSTAND DISTRICT POLICIES DECLARING IT IS ILLEGAL, AND THEREFORE, ABSOLUTELY PROHIBITED FOR ANY EMPLOYEE OF THE DISTRICT TO:

1. ENGAGE IN THE UNLAWFUL MANUFACTURE, POSSESSION, USE, OR DISTRIBUTION OF ILLICIT DRUGS.
2. POSSESS, USE, OR DISTRIBUTE ALCOHOL ON SCHOOL PREMISES.
3. BE UNDER THE INFLUENCE OF ILLICIT DRUGS AND/OR ALCOHOL WHILE DIRECTLY SUPERVISING STUDENT ACTIVITIES OFF SCHOOL PROPERTY, OR AS A PART OF ANY OF THE SCHOOLS' ACTIVITIES HELD ON SCHOOL PROPERTY.

By signing this form I acknowledge that I understand that it is unlawful, and therefore, an absolute prohibition of the District for any employee of the District to engage in any of the activities listed above, and/or as defined by board policy or administrative directive. I understand that disciplinary sanctions up to and including termination of my employment and referral of me for criminal prosecution may be imposed upon me for any violation of these standards. I further understand that compliance with these standards is mandatory and is a material term and condition of my employment by the District.

Dated this _____ day of _____, 20_____

Signature of Employee: _____