

BULLYING POLICY TRAINING VERIFICATION SHEET

PELHAM SCHOOL DISTRICT

I have read the Pelham School District's Bullying: Pupil Safety and Violence Prevention Policy (JICBB). I have also watched the Bullying Policy Training Video. Consequently, I understand the policy and my responsibilities in relation to implementing it.

Printed Name _____

Role: _____

District: _____

Signature: _____

Date: _____

