



Division of Human Resources

## **Sexual Harassment Prevention Policy**

My signature below indicates that I have completed the Sexual Harassment Training seminar offered at New Employee Orientation and understand the definitions, circumstances, and types of sexual harassment. I acknowledge receipt of the Alachua County Public School Board Policies 3362 & 4362 (Anti-Harassment) and prohibitions in regards to sexual harassment.

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*Print Name*

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*Signature*

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*Social Security Number*

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*Date Signed*

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*Job Title*

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*Work Location*