

## AP 301-1 Guest Presenter Agreement

Presenter Name	Occupation (if applicable)
Address	
Phone	Fax
Email	
Presenter's Subject Matter:	Presentation Date(s):
School District/School Contact:	
<ul> <li>I understand that I am presenting to a captive stu as set out by the Board of Education of the Abbot</li> </ul>	ident audience and I agree to uphold the policy(ies) and standards asford School District.
	ns for healthy sexual decision making, including the benefits of raceptives in relation to STDs/STIs and pregnancy, students must be ailure rates.
I will ensure the suitability and the age-appropria	teness of the topic and presentation materials.
I understand a teacher must be present in the cla	assroom during mypresentation.
Presenter Signature	Date
School Name	Location (if other than the school)
I have reviewed the content of the presentation to e with School District No. 34 policies and I will be pres	ensure that it is suitable and age-appropriate and is in compliance ent in the classroom during the presentation.
Teacher Signature	Date
Approval granted for presenting in a classroom.	
Principal Signature	Principal Name (please print)
This agreement will be filed in the school office and r	retained for one full year.
☐ Approval granted for presenting to a school-wid	le group.
Superintendent Signature	Superintendent Name - Name (please print)

 ${\it This agreement will be filed in the Superintendent's Office and retained for one full year.}$