

Los Angeles Unified School District
Human Resources
Certificated Substitute Unit

**ACKNOWLEDGMENT OF DISTRICT POLICIES AND
NEW HIRE INFORMATION**

- [Child Abuse Reporting Laws/Requirements](#)
- [Drug, Alcohol-Free Workplace](#)
- [Nondiscrimination Statement](#)
- [Sexual Harassment with regard to District Employees and Students](#)
- [Worker's Compensation Information & Physician Pre-Designation Form](#)
- [Hepatitis B](#)
- [Employee Code of Ethics](#)
- [Employee Email Account](#)
- [Reporting Paid Sick Leave](#)

Your signature below acknowledges that you have received the information above and understand and will comply with the provisions of each of the above-mentioned policies and information.

Print Full Name

Social Security#

Signature

Date