

**EDEN CENTRAL SCHOOL
P.O. BOX 29, 140 KNOWLES FLAT ROAD
EDEN, VT 05652**

Joe Ciccolo, Principal

TO: All Staff
FROM: Joe Ciccolo
DATE: August 24, 2015
RE: Required Annual Training

By signing below, I acknowledge having reviewed the following information and have successfully completed the training and fully understand the following topics:

- Computer and Internet Policies-SY2016
- Allergies-SY 2016
- Bloodborne Pathogens-SY 2016
- Confidentiality-SY 2016
- FERPA –SY 2016

I also agree to have this completed by the end of the day Thursday, August 27, 2015.

Name Printed

Signature

Date