SWORN DECLARATION OF _____

I, _____ , declare that I am in the_____ grade at

_____ School. On _____ , at _____
(date of incident) (time)

I witnessed the following:

- It is my good faith belief that disclosure of my identity as a witness or my testimony at the hearing would subject me to an unreasonable risk of psychological or physical harm because I fear retaliation.
- Under Education Code, Section 48918, Subdivision (f), I submit this declaration to serve as my sworn witness statement in lieu of my testimony at the hearing.
- I understand that a copy of my sworn statement, with my name and identity removed, will be provided to the parties to the hearing.

I have read this declaration and do declare, under penalty of perjury under the laws of the State of California, that it is true and correct to the best of my knowledge.

_____ _____
(Date) (Signature of Student)

_____ _____
(School Official Witnessing Statement) (Location)