

STATEMENT OF ASSURANCE

TEACHER EVALUATION SYSTEM STATUS – (FY 2018-2019)

A.R.S. §15-952.A & A.R.S. §15-537

SCHOOL	DISTRICT: Amphitheater U	Unified School District N	No. 10	_
	s: Each statement below needs esident or designee. Statements 1, 2018.		•	9
Yes	The district system is in comp	pliance with A.R.S. §15-5.	37.	
Yes	_Monies have, or will be expen Paragraph C.	nded solely for teacher co	mpensation as sp	ecified in A.R.S. §15-952
PRINT: _	Deanna M. Day			
	(Governing Boa	ard President or designee)	
SIGNATURE:		DATE:	1/23/2018	
RETURN	TO:			

Submit through ALEAT