

[EMPLOYER'S LETTERHEAD]

Epinephrine Indemnity Acknowledgment

Pursuant to Education Code section 49414(j), as a volunteer of the _____
[Identify District or County Office of Education or Charter School] trained to use epinephrine auto-injectors to provide emergency medical aid, you are hereby advised that you are protected by the following provisions of California law regarding civil liability for your actions in the course of scope of you serving as a volunteer in this capacity. California law provides specific legal obligations for an employer to defend and indemnify you in litigation against you, and these obligations are set forth in separate statutes in California's Government Code.

The obligation to provide a defense for you if you are sued as a result of volunteer related incidents is set forth in Government Code section 995, which provides in part:

Except as otherwise provided in Sections 995.2 and 995.4, upon request of an employee or former employee, a public entity shall provide for the defense of any civil action or proceeding brought against him, in his official or individual capacity or both, on account of an act or omission in the scope of his employment as an employee of the public entity.

The obligation to indemnify you against a civil judgment or award is set forth in Government Code section 825(a), which provides in part:

Except as otherwise provided in this section, if an employee or former employee of a public entity requests the public entity to defend him or her against any claim or action against him or her for an injury arising out of an act or omission occurring within the scope of his or her employment as an employee of the public entity and the request is made in writing not less than 10 days before the day of trial, and the employee or former employee reasonably cooperates in good faith in the defense of the claim or action, the public entity shall pay any judgment based thereon or any compromise or settlement of the claim or action to which the public entity has agreed.

By signing below, I acknowledge receipt of this notification.

Employee's Signature

Employee's Printed Name

Date: _____

cc: Employee's Personnel File