Exalt Academy of Southwest Little Rock

Agreement to Comply with EASW Board Policies

**I understand and will comply with the Director Job Description and the Conflict of Interest Policy.**

Signed, this \_\_\_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_\_\_\_\_.

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Signature of EASW Director

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 Printed Name of EASW Director