

## EAST SAN GABRIEL VALLEY REGIONAL OCCUPATIONAL PROGRAM AND TECHNICAL CENTER

1501 West Del Norte Street, West Covina, CA 917990 •(626) 962-5080 •Fax (626) 472-5125

## **OATH OF ALLEGIANCE**

## FOR PERSONS EMPLOYED BY A SCHOOL DISTRICT OF THE STATE OF CALIFORNIA

(Required by Article 20, Section 3, California Constitution)

"I, [print name]	, do solemnl	y swear (oi
affirm) that I will support and defend the Constituti	ion of the United States and the Con	stitution of
the State of California against all enemies, foreign	n and domestic; that I will bear tru	e faith and
allegiance to the Constitution of the United States	and the Constitution of the State of	f California
that I take this obligation freely, without any ment	al reservation or purpose of evasion	; and that
will well and faithfully discharge the duties upon wh	nich I am about to enter."	
	<del>-</del>	
Employee Signature		
Taken, subscribed and sworn to before me this	day of	, 2011,
at West Covina, California.		
Name and Title of Authorized Official		
	_	
Signature		