

Student Witness Fear Declaration Template

**Declaration of Witness in Fear of Unreasonable Risk of Harm
(Ed. Code, § 48919, subd. (f))**

I, _____, declare as follows (statement of incident):

If my identity as a witness in this case were disclosed, I would be subject to an unreasonable risk of harm because

If called upon to testify as a witness, I would testify to the above facts.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed this _____ day of _____, _____, in _____, California.
(Month) (Year) (City)

(Signature of Witness)

Witnessed by:

(Signature)

Print Name

Title

Date

Location

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