WITNESS INFORMATION FORM

Please complete the Witness Information Form before testifying:

Date: July 19, 2020

Name: Sean Monigold

Are you representing: Yourself X Organization

Organization (If Applicable):

Position/Title: Teacher

Address: 3010 Brunnerdale Ave. NW, Canton, OH 44708

Best Contact Telephone: 330-575-8497 Email: seanmonigold@yahoo.com

Do you wish to be added to the committee notice email distribution list? Yes No X

Business before the committee

Legislation (Bill/Resolution Number): SB317

Specific Issue: Arming Teachers in Schools

Are you testifying as a: Proponent Opponent X Interested Party

Will you have a written statement, visual aids, or other material to distribute? Yes No X

(If yes, please send an electronic version of the documents, if possible, to the Chair's office prior to committee. You may also submit hard copies to the Chair's staff prior to committee.)

How much time will your testimony require? 5 min

Please provide a brief statement on your position:

I oppose SB317 because.... Arming teachers without advanced firearms and safety training is not only unnecessary, it poses a great danger to students and school staff. Teachers are not police officers, and are not equipped to deal with the necessary decisions involving use of lethal force. Moreover, the very real possibility that a group of students or others could overpower a poorly trained teacher and take possession of the weapon makes the school a MUCH more dangerous place.

Please be advised that this form and any materials (written or otherwise) submitted or presented to this committee are records that may be requested by the public and may be published online.