## WITNESS INFORMATION FORM

Please complete the Witness Information Form before testifying:

Date: September 21, 2021			
Name: Chris Stepp			
Are you representing: Yourself	Χ	Organi	zation
Organization (If Applicable):			
Position/Title:			
Address: 270 Highland Ave.			
City: Athens	State:	OH	Zip: 45701
Best Contact Telephone:		614-395-1166	Email: steppbradley@gmail.com
Do you wish to be added to the committee notice email distribution list? Yes X No			
Business before the committee  Legislation (Bill/Resolution Number): House Bill 327			
Specific Issue: Prohibit teaching, advocating, or promoting divisive concepts			
Are you testifying as a: Proponent Opponent XInterested Party			
Will you have a written statement, visual aids, or other material to distribute? Yes X No			
(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 minutes in person			

Please provide a brief statement on your position:

I respectfully oppose this bill as written because it disrespects teachers' ability to teach difficult topics with skill and care and it disrespects students' ability to handle difficult topics in history and current events. Full statement will be provided.

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.