Student and Adult Release Forms

The following sample release forms are provided along with an explanation of the forms and your responsibility. For Tasks 3 and 4, your response will be based, in part, on actual students with whom you are working. You will submit the following forms that apply to your context:

**Student Release Form** – Required of every student whose work is submitted and/or who appears in the videotape.

**Adult Release Form** – Required for every adult who appears in the videotape.

**Administrator Release Form** - Signed by a district or school site administrator, this release states that signed release forms are on file at the school or district office.

**Candidate Attestation Form** – States that you have obtained all required release forms for the student work submitted and for each individual who appears in the videotape.

Your response to the task questions includes the submission of instructional and assessment artifacts, samples of student work, and, for Task 4, a videotape of you teaching a lesson. You are required to obtain a signed release form for every student and adult whose work you submit and/or who appears in the videotape. For adults, this includes, but is not limited to, classroom teachers, teaching assistants, parents, colleagues, or volunteers.

As a part of your task response, you must secure signed release forms. Print the student and adult release forms that follow and make copies. One release form per student and adult is sufficient for a task. Since you will be working with different students in Task 3 and Task 4, and you will therefore need to check to be sure that you have a release form for each student and adult for these tasks.

The student and adult release forms are provided in both English and Spanish.

All forms for students and for adults must be signed and completed before any videotaping is conducted. You must submit the signed originals with your task responses and artifacts. Your task response will not be complete without the signed release forms. It is your responsibility to make and retain a duplicate set of the signed release forms submitted.

As a matter of policy, some school districts request parent release forms at the beginning of every school year. Your school may already have parent release forms on file for your students. Check with your site administrator. It may not be necessary to secure an additional release form. The Administrator Release Form can be used to document school site or school district releases for your students. You will still need separate Adult Release forms for those adults who appear in the videotape.

If you do not have the permission of the parent or legal guardian to videotape a student, you must ensure that the student does not appear in your videotape. Also, if an adult has not given you a
signed release form to videotape him or her, you must be certain that he or she does not appear in the videotape.

Permission for all students and for anyone who will be videotaped should be obtained as early as possible, so that you will have ample time in which to secure the release forms for students and adults. This can be accomplished by including a cover letter that explains the purpose of the performance tasks and videotape. In your letter, you will want to emphasize that the tasks are about your teaching practice, not about the students, and also to explain why the release forms are important to you.

**Student Release Form** (English and Spanish versions)
This completed and signed form is required of every student whose work is submitted with the task response and/or who appears in the videotaped lesson. Signed originals must be submitted with the task response.

**Adult Release Form** (English and Spanish versions)
This completed and signed form is required of every adult who appears in the videotaped lesson. Signed originals must be submitted with the task response.

**Administrator Release Form**
This form may be used in lieu of individual student release forms if the school site or school district has a current videotape permission release form on file for every student who appears in the videotape or whose work you are submitting. If used, the signed original administrator release form must be submitted with the task response.

**Candidate Attestation Form**
This form verifies that you have obtained signed release forms for all individuals who appear on the videotape and/or whose work you submit as a part of your assessment response. You must complete, sign, and submit this form with your task responses for Tasks 3 and 4.
Teacher Candidate Name: _____________________________________________
Date:__________________________ (Print)

STUDENT RELEASE FORM
(To be completed by the parents/legal guardians of minor students involved in this project, or by students who are more than 18 years of age who are involved in this project.)

Dear Parent/Guardian:

I am a participant this school year in an assessment for teacher candidates. One of the primary purposes of this assessment is to enhance student learning and encourage excellence in teaching.

This project requires that short videotapes of lessons taught in your child’s class be submitted to ______________________ (name of teacher preparation program). Although the videotapes involve both the teacher and various students, the primary focus is on the teacher’s instruction, not on the students in the class. In the course of taping, your child may appear on the videotape. Also, I may be asked to submit samples of student work as evidence of teaching practice, and that work may include some of your child’s work.

No student’s last name will appear on any materials that are submitted. All materials will be kept confidential. The form below will be used to document your permission for these activities.

Sincerely, ______________________
(Teacher Candidate’s Signature)

PERMISSION SLIP

Student Name: ___________________________________________
School/Teacher:_________________________
Your Address: ________________________________________________________________________________________

I am the parent/legal guardian of the child named above. I have received and read your letter regarding the teacher candidate assessment, and agree to the following: (Please check the appropriate box below.)

___ I DO give permission to you to include my child’s image on videotape as he or she participates in a class conducted at __________________________ by __________________________ (Name of School)
(Teacher’s Name)
and/or to reproduce materials that my child may produce as part of classroom activities. No last names will appear on any materials submitted by the teacher.
I DO NOT give permission to videotape my child or to reproduce materials that my child may produce as part of classroom activities.

Signature of Parent or Guardian: ___________________________ Date: ___________________________

I am the student named above and am more than 18 years of age. I have read and understand the project description given above. I understand that my performance is not being evaluated by this project and that my last name will not appear on any materials that may be submitted.

I DO give permission to you to include my image on videotape as I participate in this class and/or to reproduce materials that I may produce as part of classroom activities.

I DO NOT give permission to videotape me or to reproduce materials that I may produce as part of classroom activities.

Signature of Student: ___________________________ Date: ___________________________

Date of Birth: ______/______/______

MM DD YY
Teacher Candidate Name: _____________________________________________
Date: ____________________________ (Print)

ADULT RELEASE FORM
(To be completed by teacher candidate, staff members and volunteers that are involved in this project.)

Adult Name: _____________________________
School: __________________________________________
Your Address: ______________________________________________________________________________________

I am the adult named above and am more than 18 years of age. I have read and understand the project description given to me.
(Please check the appropriate box below.)

___ I DO give permission to you to include my image on videotape as I participate in a class conducted at
__________________________________________________________________________ and/or to
(Name of School)
reproduce materials that I may produce as part of classroom activities. No last names will appear on any materials submitted.

___ I DO NOT give permission to include my image on videotape or to reproduce materials that I may produce as part of classroom activities.

Signature of Adult: __________________________________________________________
Date: ______________
Teacher Candidate Name ____________________________________________  
(Print)  

ADMINISTRATOR RELEASE FORM*  
(To be completed by the administrator responsible for the class that the above named teacher candidate will be videotaping.)  

Administrator Name: ____________________________________________  
Title: ___________________________________________________________  

School Name:  
______________________________________________________________________________  
____  
School Address:  
______________________________________________________________________________  
____  

I am the administrator of the school named above. I have received permission slips from each student’s parents/guardians in ________’s (Teacher Candidate Name) class who will be participating in the videotaping.  

Signature of Administrator: ____________________________________________ Date:  

__________________________________________  

*This form should only be filled out by an administrator in a school that has parents/guardians complete Student Release Forms at the beginning of the school year and keeps them on file.  
Nombre del Futuro Maestro: ____________________________________________
Fecha:__________________
(Por favor, complete en letra de molde)

**Formulario de Autorización para el Estudiante**
(Los padres o guardianes legales de los estudiantes menores de edad o los estudiantes que sean mayores de 18 años que participen en este proyecto, tienen que llenar este formulario.)

**Estimado Padre/Guardián:**

En este año escolar yo voy a participar en una evaluación experimental para futuros maestros. Esta evaluación es ejecutada por la Comisión de Acreditación de Maestros de California, (normalmente conocida como Commission on Teacher Credentialing, CTC). Mi participación en este proyecto es voluntaria. Uno de los propósitos principales de esta evaluación es de mejorar el aprendizaje de los estudiantes y mejorar la enseñanza de futuros maestros.

Este proyecto requiere que se filmen diferentes etapas de la clase en la cuál su hijo(a) participa. Aunque es posible que su estudiante aparezca en el video, el enfoque principal es en el maestro y su instrucción, y no en los estudiantes. También es posible que tenga que entregar muestras del trabajo que su hijo(a) hace en clase como ejemplo del impacto de la enseñanza del maestro en los estudiantes, y es posible que estos ejemplos incluyan las tareas de su hijo(a).

Los apellidos de los estudiantes no aparecerán en ningún material que se presente, y todo el material se mantendrá confidencial. El formulario siguiente será usado como documento de su permiso para llevar acabo estas actividades.

Atentamente, _______________________________
(Firma del Futuro Maestro)

**Autorización**

Nombre del Estudiante: ___________________________________________

Escuela /Maestro(a):______________________________________________

Su Domicilio:____________________________________________________

Yo soy el padre/Guardian legal del estudiante nombrado arriba. Yo he recibido y leído su carta acerca de la evaluación de futuros maestros y estoy de acuerdo con lo siguiente:
(Por favor marque el cuadro correspondiente)

☐ Sí, les doy permiso para que incluyan las imágenes de mi hijo(a) en los videos mientras él/ella participa en clase en __________________________ Por __________________________ (Nombre de la escuela) y/o para mostrar el trabajo que mi hijo(a) ejecuta durante las actividades de la clase. Estoy consiente que los apellidos no aparecerán en ningún material que el maestro(a) entregue.

☐ No, no les doy permiso, para que filmen a mi hijo(a) o para que muestren el trabajo de mi hijo (a) como parte de las actividades de la clase.

Firma del Padre o Guardián:

Fecha:

Yo soy el estudiante nombrado arriba y tengo mas de 18 años de edad. He leído y entendido la descripción del proyecto que se describe previamente. Yo entiendo que mi trabajo no será evaluado por este proyecto y que mi apellido no aparecerá en ningún material que se entregue.

☐ Sí, les doy permiso para que incluyan mis imágenes en los videos durante mi participación en esta clase y/o para mostrar el trabajo que yo desempeñe como parte de las actividades de la clase.

☐ No, no les doy permiso para que me filmen o para que muestren mi trabajo que hago como parte de las actividades de la clase.

Firma de Estudiante:

Fecha:

Fecha de Nacimiento: _____/_____/______ Mes   Dia   Año
CANDIDATE ATTESTATION FORM: ATTESTATION OF COMPLETED RELEASE FORMS

You must obtain signed permission forms from the parents/legal guardians of all children and from any adults who appear in your videotapes, or who are shown in any photographs with your response. You also must obtain signed permission forms from the parents/guardians of students whose work is included in any of your task response entries. Keep copies of the permission forms on file and send the originals with your task response. Your signature below verifies that you have followed all of the necessary procedures.

I hereby affirm that I have followed the privacy conventions and permission requirements of my program and/or school district. I certify that I have secured and am holding on file signed copies of all necessary permission forms from all responsible individuals.

__________________________________________
Candidate’s Full Name
(Please type or print) Date

__________________________________________
Candidate’s Signature Candidate ID Number

Submit this form with an original signature along with your task response and artifacts in the envelope provided.
If you fail to do so, your task response will not be scored.