Adult Release

Dear Sir or Madam:

I am a participant this school year in an assessment to certify teachers as accomplished practitioners in teaching. My participation in this assessment, which is being conducted by the National Board for Professional Teaching Standards (National Board), is voluntary. The primary purposes of this assessment are to make decisions about whether a teacher demonstrates knowledge and practice skills expected of an accomplished teacher, improve student learning, and encourage excellence in teaching.

This assessment requires that I submit short audiovisual recordings and/or photographs of lessons being taught in class. Although the recordings/photographs will show or involve students and others, the primary focus is on my instruction. In the course of this assessment, your image and voice might be recorded on the video, and you might be photographed, with the recordings/photographed then submitted to the National Board. Your written communications to me, such as notes and emails, might also be submitted. My submissions (the Submissions) will also include my written commentary sheets, instructional materials, essays, classroom plans, assignments and commentary.

No last name (other than mine) or personally identifiable information will appear on any materials or in any recordings that I submit as part of my assessment.

The National Board has broad rights to use my Submissions, and I assign to the National Board all of my rights in and to those Submissions. The National Board may use my Submissions, in its discretion, to further its mission of promoting excellence in education and teaching. In all cases, the National Board abides by its Confidentiality Guidelines policy, which can be found in the Guide to National Board Certification: http://www.nbpts.org/wp-content/uploads/Guide_to_NB_Certification.pdf. For instance, Submissions may be used for purposes related to my assessment by the National Board and any third parties who assist in the assessment process, and the Board may use the Submissions in National Board works and publications. The National Board might also seek separate permission from me to post the Submissions in a password-protected online database, called ATLAS, where they can be accessed by others for educational, research, and professional development purposes. Submissions will only be posted to ATLAS after securing a separate ATLAS authorization and release form from me. You can review the Terms and Conditions that apply to the ATLAS online database here: https://atlas.nbpts.org/terms The National Board may receive fees from those to whom it grants access to the Submissions. These uses may make my Submissions available for viewing by a broad range of individuals, educators, and students. Again, however, your last name would not be disclosed in the Submissions.

I am writing to request your permission for me to submit to the National Board recordings and photographs that might include your voice or image, to be used and disclosed by the National Board only in accordance with the terms of this letter and the enclosed Adult Release Form. By providing permission, you will also be granting the National Board a perpetual, irrevocable and royalty-free license to use any of my Submissions that I submit as part of my assessment, and to have and to use any copyright, rights of publicity, and other rights associated with any Submissions, and you will be releasing the National Board from all claims (including invasion of privacy) in connection with its use of the Submissions.

If you agree to participate in the activities as outlined above and to the National Board’s right to use the Submissions in the manner described in this letter, please sign the enclosed Adult Release Form. I will retain this form documenting your permission and may provide it to the National Board upon request. If you do not consent to your participation, you will be out of view in making the recordings and Photographs, and none of your written communications with me would be included in my Submissions.

Thank you very much.

Sincerely,

(Candidate signature)
Adult Release Form
(to be completed by non-students who are involved in this assessment)

Adult Name:__________________________________________________

School Name and Teacher Name:__________________________________

Your Address:__________________________________________________

I am the person named above. I have received and read the letter that accompanied this form (the Letter), regarding a teacher assessment being conducted by the National Board for Professional Teaching Standards (National Board), and I agree to the following:

☐ I DO give permission to the teacher (You) and the school referenced above to record my image and voice on video and take photographs of me as I participate in a class conducted at ____________________________ (Name of School), by ________________ (Teacher’s Name); and to provide copies of such recordings and photographs to the National Board; I also give You and the school permission to provide the National Board with copies of written communications to You and materials that I have produced or may produce as part of class activities, all on the terms and conditions described below:

1. My last name or personally identifiable information will not appear on or in any recordings, photographs or materials that are submitted to the National Board.
2. The National Board may use the materials that You submit to the National Board only for the purposes and on the terms described here and in the Letter.
3. The National Board may disclose copies of the materials that You submit to the National Board: (a) to individuals who access a National Board password-protected database for educational, research or professional development purposes, known as the ATLAS database; and (b) in National Board works or publications in which such materials might be included.

☐ I DO NOT give permission to You or the school to record my image or voice or to reproduce materials that I produce as part of classroom activities.

Signature: ____________________________________________________

Date: ________________________________