

Video Recording Permissions

Obtaining Permissions for Video Recording

Before you record your classroom instruction, you must ensure that you have the appropriate permission from the parents/guardians of your students and from adults who appear in the video recording.

A sample request for a release form and sample release form are provided for your reference. These are sample materials only, and reflect the type of notification and permissions that must be obtained prior to recording your video and submitting it with your edTPA materials for scoring. Check with your preparation program for other specific information that may be required to include in the release form. The samples provide information about the purpose of the video within the context of edTPA as well as how the videos may be used by Stanford University and Pearson. Any other use, e.g., within your institution, requires separate explicit permission. You may not use the video recording for any purpose that is not within the parameters of the release forms you received for students or adults who appear in your video.

Sample Request to a Parent/Guardian/Student for a Release Form

Dear Parent/Guardian:

I am a student teacher at XXXXXXXX University, participating in edTPA to fulfill a program requirement for my institution and/or a state teacher certification requirement. edTPA is a teacher performance assessment for teacher candidates, created by Stanford University. My edTPA materials will be submitted to and scored by educators in a secure system operated by Pearson.

The performance assessment documents a series of lessons I teach in your child's classroom and includes short video recordings. Although the video recordings involve both the teacher and various students; the primary focus is on my instruction, not on the students in the class. In the course of recording my teaching, your child may appear on the video. Also, I will collect samples of student work as evidence of my teaching practice, and that work may include some of your child's work.

No student's name will appear on any materials that are submitted and materials will be kept confidential at all times. The video recordings and student work I submit will not be made public in any way. Materials I submit will be reviewed by my program at XXXX University. My assessment materials may also be used by Stanford University and Pearson under secure conditions for edTPA program development and implementation, including scorer training, and to support continued program improvement activities such as future validity and reliability studies. The form attached will be used to document your permission for these activities.

Sincerely,

(Teacher Candidate Signature)

Student Release Form

(to be completed either by the parents/legal guardians of minor students involved in this project, or by students who are 18 or more years of age that are involved in this project)

PERMISSION SLIP

Student Name: _____

I am the parent/legal guardian of the child named above. I have read and understand the project description given in the letter provided with this form, and agree to the following:

(Please check the appropriate box below.)

I DO give permission to you to include my child's student work and/or image on video recordings as part of video(s) showing your classroom performance, to be used for the purpose of participating in edTPA.

I understand that my child's name and any other personally identifiable information about my child will not appear on any of the submitted materials.

I DO NOT give permission to you to include my child's student work and/or image on video recordings as part of video(s) showing your classroom performance, to be used for the purpose of participating in edTPA.

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 in the letter provided with this form, and agree to the following:

I DO give permission to you to include my student work and/or image on video recordings as part of video(s) showing your classroom performance, to be used for the purpose of participating in edTPA. I understand that my name and any other personally identifiable information about me will not appear on any of the submitted materials.

I DO NOT give permission to include my student work and/or image on video recordings as part of video(s) showing your classroom performance, to be used for the purpose of participating in edTPA.

Signature of Student: _____ **Date:** _____

Date of Birth: ____/____/____
MM DD YY