**LETTER AND RELEASE FORM FOR**

**TEACHER CANDIDATE PARTICIPATION**

Dear Teacher Candidate:

As part of the Teacher Performance Assessment (edTPA) assessment, you are required to submit video recordings of your in-class instruction. You will need to obtain signed permission slips from any student who is shown in the video. The signed forms must be collected before you tape your lessons.

We also need signed permission from teacher candidates before we can evaluate candidate videos. This form allows [name of teacher prep program] to review and retain your edTPA videotape. We are also requesting that you give us permission to use the video for training purposes, should the need arise.

These videos are used only under strictly supervised circumstances and will not be viewed or released outside of [name of teacher prep program].

Below is the permission form for you to sign. Please return the form to [location] by [date].

We hope you have a positive experience with the edTPA assessment.

Sincerely,

[Faculty of Teacher Preparation Program]

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**TEACHER CANDIDATE PERMISSION FORM**

**Candidate Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Cooperating School/Teacher**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  I give permission for my video recording to be reviewed for evaluating my teaching skills within the edTPA Assessment.

[ ]  I give permission for my video recording to be reviewed for edTPA Assessment training.

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Signature of Candidate Date