

FOREST AREA SCHOOL DISTRICT

2015-2016

Confidentiality Agreement for Staff, Substitute Teachers, Educational Assistants, Student Teachers, Block Students, and Other Visiting Forest Area School District Programs

I, the undersigned, agree to the condition stated below regarding Forest Area School District student confidentiality:

- 1) I understand that I may have access to information, such as Individualized Education Plans and Evaluation Reports, and may observe circumstances, which are confidential according to State and Federal Law. Under no circumstances will I discuss the observed information or behavior without the permission of the Forest Area School District representative, or reveal names of individuals to any unauthorized persons.

- 2) I understand that, with the permission of the Forest Area School District program supervisor, I may discuss relevant and appropriate matters with authorized persons, if parents complete appropriate release of information forms.

- 3) I understand that if I am a block student or student teacher, I may discuss certain aspects of students/classroom with my professor or cooperative teacher and will assure the anonymity of all students. These discussions will be limited to: (1) type of situation presented; (2) teacher approach to situation; (3) alternative solutions; (4) how the situation was resolved; (5) critique of the process.

I have read this agreement and promise to abide by it. I understand that the right of confidentiality is guaranteed to each individual with disabilities, and I agree not to violate this right.

Signature: _____ Forest Area School District Rep.

Print Name: _____ Title: _____

Effective Date: _____