

Safe and Orderly Learning Environment

Observation by Private Provider - Student Currently Enrolled - Exhibit A

1. All visitors to schools must sign in at the main office and follow all school rules regarding identification of their status as a visitor (i.e. wear a visitor badge or sticker).
2. Parents/guardians must provide a specific consent in writing, setting forth that the private provider has their permission to observe the student.
3. Any private provider observing a special education student must be accompanied by a Special Education Supervisor, Program Coordinator, or supervising teacher at all times.
4. The other students in the classroom have a right to privacy that must be respected. Private providers must agree that they will not disclose information about other students during the course of the observation in any forum.
5. Staff will never provide information about a student to observers, absent express written consent to do so from the student's parent/guardian. As such, staff is unable to provide any context for specific student/teacher interactions and will not respond to questions that relate to other students.
6. Observations are just that, observations. They are not times to ask questions of staff or to engage staff in a dialogue about the student they are observing. Staff must be focused on meeting the needs of their students during the school day. If a parent wishes to have a dialogue about what their private provider observes, the appropriate venue for that conversation is a meeting, and for special education students, an IEP meeting.
7. If at any time the private provider's presence becomes disruptive, or the private provider takes actions contrary to these guidelines, either a school administrator, or in the case of observations of special education students, the Special Education Supervisor, Program Coordinator, or supervising teacher, will terminate the observation.

Parent

I am a parent/guardian of _____.

I am providing my permission for _____ to observe my child at school.

I have read the above guidelines, and I understand and agree to abide by them.

Signature: _____

Date: _____

Provider

I am a private provider working for the _____ family.

I have read the above guidelines, and I understand and agree to abide by them.

Signature: _____

Date: _____

