

Teacher Participation Agreement

This document explains the terms of participation for TNTP's *Great Teaching, Great Feedback*, during the 2011-12 school year.

Pilot teachers understand that participation involves the following:

1. I will submit regular videos of lessons that I present to my classroom and will receive written feedback and ratings of my performance on the video lessons.
2. I will obtain access to and use of video and audio equipment to record my classroom instruction and submit the videos online. Any videos not meeting technical quality for viewing (i.e. inaudible sound, lack of focus), will not be reviewed. Tips for videotaping will be provided by TNTP.
3. I will have full access to view the videos of my classroom teaching and the feedback I receive from TNTP at any time throughout the duration of the pilot for my own professional development purposes.
4. I understand that these videos will be reviewed by trained observers and TNTP administrators in order to complete evaluations of the classroom instruction.
5. I understand that the videos I upload and the feedback I receive will at no time be shared with my supervisor, district officials, or affect my employment in any way.
6. In conjunction with the video-recorded class sessions, I may be asked to provide information about each lesson. This information may include: lesson scheduling information, lesson plans, blank copies of student work assignments or assessments, and/or anonymous completed assignments from students in my classes.
7. I understand that any student work samples that I submit in conjunction with lessons must remain anonymous.
8. I understand that should I change the school, grade, and/or subject I teach during the project, I should notify TNTP, and that I may not be able to continue participation in the program.
9. I will distribute, collect and maintain the Parent Consent forms for students in my observed classes (forms are provided by TNTP.) Classes without the affirmative written consent of all parents cannot participate in the project.
10. My participation is strictly voluntary and I may withdraw my participation **at any time** with no penalty to me or my school. My withdrawal will be effective for all future data collection efforts, but existing data from prior involvement will remain part of the collection.

TNTP agrees that:

1. All video and other data will be housed in a secure database administered by Teachscape.
2. In order to access any data that may include identifying information (including that associated with the videos), reviewers as well as other individuals and groups using the database will be required to sign pledges promising to honor the confidentiality of all students, teachers, and schools as well as to work with stewards to improve the collection, including helping to locate information that could compromise confidentiality for students and/or teachers. All users will also be required to limit their use of the data to the purposes, timeframes, and scope outlined in their agreements.
3. There will not be any summary reports or analyses that reveal my personal identity.

If you have any questions you can contact TNTP at greatteaching@tntp.org.

Please complete the section below and return this form to Erin Martin at greatteaching@tntp.org or fax to 888-288-7109. In signing and returning this form, you agree to participate in the *Great Teaching, Great Feedback*, consistent with the above terms.

Signature of Teacher

Date

Name (Please Print)

School

Subject

Grade(s)

Telephone Number

E-mail Address

Best Time(s) to Reach Me

Best Way to Reach Me (specify email, phone, or other)

OPTIONAL RELEASE

If you have signed the form above, you are able to participate in *Great Teaching, Great Feedback*. In addition, if you choose, your videos can be used for training purposes by TNTP or in other contexts outside the program. All of these purposes would be for training and professional development, and would be in controlled environments that require log-in and security. If you choose to allow TNTP to use your videos, please indicate your agreement below:

Signature of Teacher

Date

Name (Please Print)