

Dear Parent/Guardian,

As part of my student teaching, I am required to complete a Teacher Performance Assessment (CPAST), which is conducted by Ohio State University and Bemidji State University.

The CPAST documents my teaching in your child's classroom. To complete it, my classroom teacher and university supervisor observe my instruction and then meet with me to provide feedback.

At times, a university supervisor may not be able to attend in person. In those cases, I will either arrange a virtual observation or record my teaching demo and share it with them. While these recordings may involve both the teacher and students, the focus is always on my teaching practice, not on students in the classroom. However, your child may appear in the video.

Through the student teaching period, my classroom teacher and university supervisor will also meet with me to discuss my progress. In these discussions, examples of student work may be referenced as evidence of my teaching effectiveness (e.g., how clear my instructions were or how useful my feedback was). Even if student work is discussed during these meetings, the focus is evaluating my teaching, not the students work.

Please know that any video recordings or student work used for CPAST will remain confidential and will never be made public. The Student Release Form below will be used to document your permission for these activities.

Sincerely,

(Teacher Candidate)

Student Release Form

Student's Name: _____ **Parent/Guardian:** _____

I am the parent/legal guardian of the student named above. I have read and understand the aforementioned CPAST project description and agree to the following:

☐ **I DO** give permission to include my student work and/or image on video recordings, to be used for the sole purpose of participating in CPAST.

☐ **I DO NOT** give permission to include my student work and/or image on video recordings, to be used for the sole purpose of participating in CPAST.

Signature of Parent/Guardian:

Date: _____