

**November 11, 2012**

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Please be sure to have the attached form signed and returned to me prior to the requester viewing video tape.

Thank you.

Bev Osborne  
Monongalia County Schools  
Board Office

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CASE NO. \_\_\_\_\_

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## **MONONGALIA COUNTY SCHOOLS CONFIDENTIALITY AGREEMENT**

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I understand that I am viewing privileged information contained in this video. This video is classified as a student record.

I agree that I will not divulge any of the contents of this video nor discuss any of its contents.

I understand that I am not allowed to copy this video nor obtain a copy of this video.

\_\_\_\_\_  
Signature of individual viewing the video/date

\_\_\_\_\_  
Signature of administrator viewing the video/date

## VISITOR POLICY 10-04

Policy 10-04:

Requires all visitors to report to the school office upon entering the school, and it prohibits all visitors from standing in the hallways or loitering without approval from the office.

All visitors should make an appointment in advance with the Principal

Visitors shall not disrupt the classroom, interrupt a teacher who is teaching a class, or interrupt during preparation times or other related instructional duties.

The school Principal may terminate a visit at any time if he/she observes the visit is disrupting faculty, or the learning process.

- 1) Make an appointment with the Principal in advance
- 2) Immediately report to the office upon arrival and present proper identification
- 3) Go to the staff lounge or designated area to meet with faculty/staff during agreed upon time
- 4) General visits are limited to faculty/staff non-instructional time (duty free lunch time)
- 5) Check out with office upon completion of visit
- 6) Before and after hour visits are encouraged (Principal approval is still required)

\*\* Faculty/staff may still schedule individual appointments with their union representatives during their lunch and planning periods.

# MONONGALIA COUNTY SCHOOLS

## CONFIDENTIALITY AGREEMENT FOR CLASSROOM VISITORS

I, \_\_\_\_\_, do hereby agree and acknowledge that in the course of my visit to observe a child, I will come into contact or observe certain confidential and personal information about other students and/or employees of Monongalia County Schools. I fully understand and acknowledge that Monongalia County Schools is obligated to protect the privacy of the students and its employees within the Monongalia County School district.

I recognize that confidential information may be obtained from many different sources, including, but not limited to, verbal information, written documents, and personal observations. I agree that all observations and information arising from my classroom observation or visits are important, confidential, material and effect the successful protection of privacy for all students and employees. I further understand information is held as confidential not only as to outside parties, but also as to Monongalia County students and employees whose jobs do not require access to such information.

By signing this Confidentiality Agreement, I acknowledge the following:

1. In the course of my visit to observe a classroom, I may become aware of confidential information about specific students, which may include such information as students' academic performance, health, disabilities, and related matters.
2. Disclosure of confidential information without consent to any other employee of Monongalia County Schools; any student; or any outside entity or person is strictly prohibited except where such disclosure is essential to protect the health, safety, or well-being of a student or employee. If I am unsure whether disclosure of confidential information is essential to protect the health, safety, or well-being of a student or employee, I am required to consult with the school principal or the Superintendent of Schools prior to making any disclosure.
3. Any notes taken during observation shall be presented to the classroom prior to leaving the classroom. All notes will be inspected by the classroom teacher and are subject to redaction to ensure that student privacy is maintained.
4. I will not photograph or videotape any person or any part of any building during my visit to the school and while observing a classroom.
5. I will not tape record any conversation during my visit to the school and while observing a classroom.
6. Any discussion I may have regarding questions, concerns, or comments shall be directed to the school principal or the faculty member responsible for the classroom. All discussions will occur outside the presence of students and other faculty members.

**I HAVE READ THIS CONFIDENTIALITY AGREEMENT AND AGREE TO ITS TERMS.**

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Name of child to be observed: \_\_\_\_\_

Name of school where observation will take place: \_\_\_\_\_

Name of observer: \_\_\_\_\_

Signature of Observer: \_\_\_\_\_