File: KIA-E

OBSERVATION OF EDUCATION PROGRAMS BY PARENTS AND/OR DESIGNEES FOR EVALUATION PURPOSES CONFIDENTIALITY AGREEMENT

Student to be Observed		Program/Class
I hereby acknowledge and agree to the c Observation Policy.	onditions set forth in the attach	eed Hull Public Schools
Observer's Name	Signature	Date
**************************************	**************************************	
Hull Public Schools Staff Member Assig	gned:	
Observation Date, Time and Location:		
This agreement will be in effect when sign Schools and the Building Principal.	gned by the Director of Student	Services for Hull Public
Director of Student Services	Date	e
Building Principal	Date	<u> </u>

Adoption: January 23, 2012

First reading 2021 revision: October 4, 2021

Second reading: October 18, 2021 Adoption: November 22, 2021

Proposed reconsideration: November 2026