



Oath of Student Confidentiality

As an observer in the Mesquite Independent School District, I do hereby certify, warrant, and affirm that I will fully comply with the stated requirements for confidentiality.

(Please initial each statement below.)

_____ I understand that I will only observe in the classroom. I will not be working directly with students or at any time be supervising students.

_____ I will in no way identify any individual student or group of students observed during my field experience with MISD.

_____ I will in no way reveal confidential information concerning students observed during my field experience with MISD.

_____ I will in no way identify the teachers or campus observed during my field experience.

_____ I understand that pictures, video tape, or tape recordings of students or staff will not be allowed during my field experience.

I do further certify, warrant, and affirm that I will faithfully and fully comply with all requirements regarding maintaining the confidentiality of students and staff and abiding by the access level assigned.

IN WITNESS WHEREOF I affix my hand on the _____ day of _____, 20____.

Printed Name

Signature

Name of College or Alternative Certification Program