Saint Paul Public Schools
Policies & Practices Acknowledgement

Name: ____________________________________________________ Date: ______________

Email: ________________________________ Phone: _____________________________

Program or Role in Saint Paul Public Schools: ________________________________

Service Begin Date: ______/_____/_______ Service End Date: ______/_____/_______

Program Supervisor: _____________________________

SPPS Program Sponsor or Contact: _______________________________

Saint Paul Public Schools requires that adults who work with our students follow state and federal law and best practices. Individuals seeking credentials that provide access to any Saint Paul Public Schools data sets must acknowledge that they have read the guidelines and agree to follow them.

Please fill out the information above and provide the signed form to the Saint Paul Public Schools contact for your program, either directly or through your program supervisor prior to the start of your placement.

By my signature below, I agree to the following as terms and conditions of my placement with SPPS:

1. I confirm that I have read the Saint Paul Public Schools Guidelines for Student Data Privacy Practices and agree to follow them. Guidelines are detailed on the SPPS website linked here.

2. I understand and agree that I am responsible for understanding and complying with the Family Educational Rights and Privacy Act (FERPA) and the Minnesota Government Data Practices Act.

3. I understand and agree that, pursuant to FERPA, I may not disclose any personally identifiable information from an education record without the prior consent of the parent or eligible student and that I may only use the information obtained for the purposes for which the disclosure was made.

4. **Background Check.** I will accurately, truthfully, and fully complete all necessary paperwork and voluntarily provide all useful or necessary information to assist with completing my background check prior to the first day of my placement.

5. **Compliance with SPPS Policy.** Prior to the first day of my placement, I will review SPPS policies, available on SPPS’ website, including but not limited to: Saint Paul Public School Policy 101.00 Racial Equity, 102.00 Equal Opportunity/Non-Discrimination, 414.00 Tobacco-Free Environment, 413.00 Drug-Free Workplace, 415.00 Harassment, Violence and Other Offensive Behavior, 415.00.1 Procedure: Harassment, Violence and Other Offensive Behavior, 903.00 Dangerous Weapons, Firearms, 500.00 Gender Inclusion, and 500.00.01 Procedure: Gender Inclusion Procedures.
6. **Program Expectations.** I agree to use my best efforts to:
   a. Understand, follow, and enforce rules, regulations, and policies of my mentor teacher, placement site, and SPPS as a district.
   b. Be proactive in improving my teaching skills by being reflective, observant of other teaching methods, and by taking constructive criticism positively.
   c. Be professional in my interactions with all members of the school community, including students, parents, staff, and administration.
   d. Adequately prepare for all teaching assignments and expectations and meet all applicable deadlines.

7. **Acknowledgment of Recommendation.** I understand and agree that SPPS has recommended that I join the National Education Association (“NEA”) Student Program or a similar association that offers student teachers professional liability insurance as a benefit of membership.

8. **Execute and Return.** I agree to execute and return a copy of this Saint Paul Public Schools Policies & Practices Acknowledgement to SPPS and to my educational institution prior to the first day of my placement.

Signature: ___________________________ Date: ________________