



University of Colorado  
Boulder

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## Teacher Performance Assessment Release to CU Form

I, \_\_\_\_\_, voluntarily agree to release my TPA DVD to the School of Education at CU Boulder. I understand that doing so allows only teacher education program instructors, supervisors, and/or cooperating teachers associated with the School of Education at Boulder to view my DVD for the purposes of training and program evaluation. My materials will only be made available through a secure platform (e.g., never posted or viewed in a public setting such as YouTube or Facebook). My materials will be removed at the conclusion of training or program evaluation sessions.

I understand that any identifiable information in regard to my name and/or agency name will be listed *only* in this release form; however, because there is a video component within the TPA, I accept that some viewers may recognize me during future training sessions.

Teacher Candidate Name \_\_\_\_\_

Date \_\_\_\_\_