



Student Observation Agreement

I hereby agree to preserve the confidentiality of all records that I view or have access to during the course of this internship/job shadowing with the Great Prairie Area Education Agency.

I understand that records may be confidential by virtue of:

- Family Education Rights and Privacy Act;
- Protection of Pupil Rights Amendment;
- Individuals with Disabilities Education Improvement Act;
- Health Insurance Portability and Accountability Act;
- Americans with Disability Act;
- Iowa Administrative Rules for Special Education (Iowa Code Chapter 41); and
- Other relevant state or federal laws.

Under these privacy laws, I may not disclose information about students or families. If in doubt about confidentiality of any record or my ability to legally disclose information, I agree to ask my supervisor before disclosing any information.

I acknowledge that I am a student exploring career opportunities or completing job shadowing educational requirements. I am not an employee, nor an agent of the Great Prairie Area Education Agency. I will be permitted to observe real-life work activities, but by doing so I am not permitted to disclose to any others the activities except in a general manner. I am not to use the names of students that I observe in any discussions except with other employees of Great Prairie Area Education Agency.

If, because of my actions, it is determined that I am not following the directions of the supervisor, not following rules of good conduct or not following the rules of the school where I am observing, my supervisor may terminate my observation experience immediately.

I will dress appropriately and act appropriately as if I were an employee.

The terms of this agreement remain in effect during and after the term of this internship/job shadowing agreement.

College:			
Student Name:	Signature:	Date:	