

	Student Name:	
	Teacher/Social Work:	
	Parent/Guardian Name(s):	

2020-2021 Agreement to Provision of Group Special Education and/or Related Services Through Alternative Means

During the school closure period due to the COVID-19 pandemic, to the extent that any student's IEP, special education and/or related services are provided outside of the school building through alternative means (i.e., by phone or electronically through online/virtual platforms such as Google Hangout, Google Classroom, Zoom, distance learning plans, etc.), the delivery of group services poses unique confidentiality issues for children and their families. Therefore, with respect to any group, special education, or related services provided to my child through alternative means:

1. I understand that during the course of the school closure my child will be provided with special education and related services through Britten School's Remote Learning Plan, which includes e-Learning, during the school closure period due to the COVID-19 pandemic.
2. I hereby agree that neither I nor anyone else in our home will listen to, observe, or record the delivery of any group special education and/or related services to my child.
3. I hereby acknowledge that Britten School cannot guarantee that the parents/guardians of the other children in my child's group, or anyone else in the home of such other children, will refrain from listening to, observing, or recording any group special education and/or related services provided to my child.
4. I agree that Britten School will not be held responsible if other parents/guardians or individuals in their homes violate these acknowledgments/agreements when my child is provided with group special education and/or related services.
5. I understand that my refusal to sign this Agreement will result in my child not receiving group special education and/or related services outside of school through alternative means and that an individualized decision will be made by my child's IEP team regarding whether and to what extent such group services will be made up at another time.
6. I understand that I may revoke this Agreement in writing at any time, after which my child will no longer receive group special education and/or related services outside of school through alternative means but may be eligible for make-up services, as determined by the IEP team, at another time.

Parent/Guardian Signature

Date

Student Signature (if 12 or older)

Date