



Virginia Barry, PhD.  
COMMISSIONER  
Tel. 603-271-3144

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF EDUCATION  
101 Pleasant Street  
Concord, N.H. 03301  
FAX 603-271-1953  
Citizens Services Line 1-800-339-9900

**Informed Consent and Permission to Use Portfolio Materials for Training Purposes**

Dear Parent or Guardian:

Materials from the New Hampshire Alternate Assessment portfolio submitted for your child, (please print) \_\_\_\_\_, might be selected to be included in the Teacher Training Manual. This material may also be used for future manuals or other materials designed for training purposes. If chosen, the selection recognizes effort made by your child and the efforts of the lead implementer responsible for compiling the evidence for the New Hampshire Alternate Assessment. Before we can include your child’s material, we require your permission. Please review the permission form below and sign in the designated place to indicate your decision regarding use of your child’s material.

I, (please print) \_\_\_\_\_, am the parent or legal guardian of (please print) \_\_\_\_\_. In this capacity, I grant the New Hampshire Department of Education permission to use the following material(s) from my child’s New Hampshire Alternate Assessment portfolio.

Please check to indicate your consent for each individual type of portfolio evidence:

- paper products (**personal identifiable information, such as last name, school name, etc., will be removed**)
- pictures (**face will be blanked out**)
- audiotapes
- videotapes

**OR**

I do not give consent.

I acknowledge this material can be used for the express purpose of training other educators, parents, or related service providers to either compile or score an Alternate Assessment portfolio.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date