**World Bank Teach Classroom Observation Study in COUNTRY**

Dear Teacher,

I would like to invite you to participate in the **World Bank Teach Classroom Observation Study**. The Teach Classroom Observation Study aims to enable teachers to share examples of best practice with colleagues across COUNTRY. This innovative project is led by the World Bank, and managed and implemented in COUNTRY by NATIONAL CENTRE. The World Bank requests consent to record your lesson and use this video as part of a training the NATIONAL CENTRE will conduct on teacher practices. The recordings will **not** be used for evaluation purposes, but rather as examples during the training.

**Please read the attached consent form for the Teach Classroom Observation Study carefully.** If you have any comments or questions, please contact the Teach team at teach@worldbank.org.

We look forward to welcoming you to this innovative and exciting project.

- Teach Team

# Optional: Global Classroom Observation STudy

## What is the GLOBAL Classroom Observation study?

The Teach Classroom Observation Study will make videos containing examples of teaching practice from around the world publicly available. This will illustrate different classroom practices in different countries and contexts which can improve learning outcomes – not only improved test results, but more motivated and engaged students.

Your decision to participate (or not participate) will not have any impact on your working conditions or career.

*If you wish to participate in this study, kindly check the box on the consent form.*

# teacher consent form for teach classroom observation study in country

I, the undersigned, FULL NAME, have read the information provided by the International Bank for Reconstruction and Development (World Bank) on the Teach Classroom Observation Study and understand its content. I have decidedto participate in the Teach Classroom Observation Study have therefore agreed to sign this consent form.

I hereby authorise the World Bank to:

- fully dispose of still or moving images of myself, as well as audio elements of which I am the source. In particular, such images, audio, and video may be reproduced, displayed and/or adapted, in whole or in part, by the World Bank; and

- by checking this box, I agree to make the videos containing footage of myself available to the public as part of the World Bank’s Global Video Library. ****

I acknowledge that the World Bank may be required to forward the images, sound elements and my personal data to an external service provider for the purpose of producing videos intended to be used within the context defined above. I understand that I will not have any intellectual property rights in the Global Video Library or its supporting materials.

I understand that my participation is entirely voluntary and that I can withdraw at any time without giving a reason, and without any impact on my working conditions or career.

I understand that the recordings and other materials will be processed in accordance with the World Bank principles governing computerized personal data processing. I understand that my name will not be disclosed. If my name appears in written or verbal form during the videos, the World Bank will ensure that it is removed or distorted before the video’s inclusion in the Global Video Library. I understand that my face and voice may reveal sensitive personal information, for example regarding my race, religion and physical condition. I understand that video recordings and other study materials may be securely transferred and stored in locations outside of the COUNTRY.

I grant this authorization on a worldwide, free-of-charge basis and without any time limit. I note that I have, at any given time, the right to request, in writing to the NATIONAL CENTRE and/or the World Bank, the correction or deletion of the data referred to above in any video which may have been produced.

I understand that I am free to contact the NATIONAL CENTRE, or the World Bank and teach@worldbank.org regarding any questions I may have.

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Teacher:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_