

DAVID IGE  
GOVERNOR



TOM HUTTON  
CHARTER SCHOOLS  
EXECUTIVE DIRECTOR

DAVID GIBSON  
HO'OKAKO'O CORPORATION  
EXECUTIVE DIRECTOR

ANNA WINSLOW  
Kamaile Academy  
Principal

STATE OF HAWAII  
Kamaile Academy PCS  
85-180 Ala Akau Street  
Waianae, Hawaii 96792

## KAMAILE ACADEMY VISITOR/ CLASSROOM OBSERVATION PROTOCOL

*Effective 2/2016*

Welcome to Kamaile Academy Public Charter School. Throughout the course of the school year we often field requests from parents, advocates, and private providers to visit our school and to observe classrooms. In an effort to minimize disruption to instruction and student learning and in order to facilitate a productive and enjoyable visit, we ask for your understanding and cooperation in the following guidelines.

- **Visitors shall provide the Principal/Designee with notice to visit the school at least five school days in advance of desired visitation date.** Visitors shall inform the Principal/Designee of the purpose of the visit using the "Request for Observation" form that is on the other side of this document.
- Visitors need to sign-in at the main office and wear a visitor's badge.
- There will be a host to escort you throughout the duration of the visit.
- Visitors(s) shall remain in the area designated by the classroom teacher or host throughout the visit.
- Videotaping, picture-taking, or electronic recording is not permitted without written permission from the Principal/Designee.
- At no time should the observation interfere with instruction or unduly disrupt the classroom.
- When visiting a classroom, we ask that you refrain from interacting with students and adults so as to minimize disruptions to student learning and classroom instruction. Your cooperation will be in compliance with the Family Educational Rights and Privacy Act (FERPA).
- Please refrain from approaching the teacher to ask questions to minimize disruption to instruction and student learning.
- The visitation shall be no more than 30 minutes unless otherwise approved by the Principal/Designee.
- The Principal/Designee reserves the authority to deny requests to individuals if the Principal/Designee believes the FERPA may be compromised.
- The observation may be terminated immediately if it appears that the observer is distressing a student(s) or disrupting the routines(s) or activity(ies).

Sincerely,

A handwritten signature in black ink, appearing to read "Anna Winslow".

Anna Winslow  
Principal



**STATE OF HAWAII**  
**DEPARTMENT OF EDUCATION**

**REQUEST FOR OBSERVATION**  
**(PARENT OR PARENT DESIGNEE)**

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

Student's Date of Birth: \_\_\_\_\_

FROM: the Parent(s)/Guardian(s) of \_\_\_\_\_  
Name of Student

TO: \_\_\_\_\_  
Principal

\_\_\_\_\_ School

*Please sign and return this document.*

I understand the observation is for the sole purpose specified below and limited to my child. Information from the observation is to be used only for the intended purpose and limited to my child. I also understand that the observation must not interfere with instruction or disrupt the classroom.

\_\_\_\_\_ Print Parent(s)/Guardian(s) Name

\_\_\_\_\_ Parent(s)/Guardian(s) Signature

\_\_\_\_\_ Date

**NOTIFICATION OF OBSERVATION**

**PURPOSE:**

NAME OF OBSERVER: \_\_\_\_\_

If observer is not the parent(s)/guardian(s), complete below.

**I grant permission to the Hawaii Department of Education for the above named individual to observe my**

**child at** \_\_\_\_\_  
Name of School

\_\_\_\_\_ Print Parent Name

\_\_\_\_\_ Parent(s)/Guardian(s) Signature

\_\_\_\_\_ Date

**FOR AGENCY USE ONLY:** Date of receipt of signed parent(s)/guardian(s) request: \_\_\_\_\_

Received by: \_\_\_\_\_  
Name of School

\_\_\_\_\_ Initials