



Please see following our annual State Recognized Partnership Agreement as well as our Operational Expectations Addendum.

Please have your superintendent and/or director of schools review, sign and return this document in its entirety and maintain a copy for your system's records.

We look forward to working with your district as we partner to provide the best preparation for future educator's as they seek to impact students and schools in Tennessee.

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Clinical Experience Coordinator  
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*Dr. Shane Brown*

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LEE UNIVERSITY

Developer ~ Empathy ~ Learner ~ Harmony ~ Responsibility

# Educator Preparation Provider/ Local Education Agency State-Recognized Partnership Agreement

<b>Educator Preparation Provider (EPP)</b>	The University of Tennessee at Chattanooga
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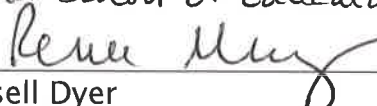
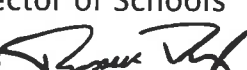
<b>Local Education Agency (LEA)</b>	Cleveland City Schools
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<b>Term of Agreement</b>	9/1/2020-8/31/2021
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<b>EPP Contact/Designee</b>	
<b>Name:</b> Renee Murley	<b>Title:</b> Director, School of Education
<b>Email Address:</b> renee-murley@utc.edu	<b>Phone Number:</b> 423-425-4684

<b>LEA Contact/Designee</b>	
<b>Name:</b> Kelly Kiser	<b>Title:</b> Director of Human Resources
<b>Email Address:</b> kkiser@clevelandcityschools	<b>Phone Number:</b> 423-472-9571

<b>Other Key Staff</b>	
<b>Name:</b> Christopher Brown	<b>Name:</b>
<b>Title:</b> Clinical Experience Coordinator	<b>Title:</b>
<b>Name:</b> Avalon Gourlay	<b>Name:</b>
<b>Title:</b> Certification Officer	<b>Title:</b>

<b>Certification (signatures verify partnership)</b>	
<b>EPP Head Administrator</b>	<b>Name:</b> Renee Murley <b>Date:</b> 9/29/2020 <b>Title:</b> Director School of Education <b>Signature:</b> 
<b>LEA Director of Schools</b>	<b>Name:</b> Russell Dyer <b>Date:</b> 9/24/2020 <b>Title:</b> Director of Schools <b>Signature:</b> 

**Educator Preparation Provider/  
Local Education Agency  
State-Recognized Partnership Agreement**

**Prompt 1:** Identify the collaboratively-developed **recruitment and selection strategies and goals.**  
**(500 words)**

# **Educator Preparation Provider/ Local Education Agency State-Recognized Partnership Agreement**

**Prompt 2:** Identify how entities will collaborate to **select, prepare, evaluate, support, and retain high-quality clinical educators**, both provider and school-based, who demonstrate a positive impact on candidates' development and pre-K-12 learning and development. **(500 words)**



## Operational Expectations Addendum

These expectations are being attached to the State-Recognized Partnership Agreement to confirm operational duties not covered in the document. Expectations are as follows:

1. All changes in Clinical Placements by the Institution will be made in cooperation with administration of the LEA.
2. The Institution and LEA shall keep confidential all candidate information from outside individuals and organizations as described by the Family Educational Rights and Privacy Act (FERPA) unless such disclosure is ordered by a court.
3. All Institutional representatives and candidates will observe all rules and regulations of their attending school and LEA.
4. All Institutional candidates will be familiar with the *Tennessee Teacher Code of Ethics*.
5. No Institutional candidate will be considered an employee of the LEA nor receive compensation from the LEA unless designated as a 'Job-Embedded Practitioner.'
6. All Institutional candidates will undergo a criminal background check pursuant to *TN Code Annotated* 49-5-413. Cost of such checks are not the responsibility of the LEA.
7. Audiovisual recording of the candidate is allowed by the LEA for purposes of improving instruction and assessment. Protocol for recording data inside the LEA requires a parental consent and release form provided by the Institutions and approved by the LEA.