

# New Teacher Induction Program Affidavit



Teacher Name: \_\_\_\_\_

Employee ID# \_\_\_\_\_

Mentor Name: \_\_\_\_\_

Administrator Name: \_\_\_\_\_

School: \_\_\_\_\_

Certification Type      PROFESSIONAL      TEMPORARY

Year in Program      YEAR 1      YEAR 2

By signing this affidavit, you are confirming, to the best of your knowledge, the following:

- The mentor has observed the mentee (Yr. 1 - twice, Yr. 2- once)
- The mentee has visited the classroom of a highly effective teacher, (Yr. 1- twice, Yr. 2- once)
- The mentor and mentee have met weekly/bi-monthly (TEMP CERT teachers are mentored Yr. 1-weekly, Yr. 2 twice a month), all others are twice a month both years. ***The mentoring log is attached to this document and sent to the district office by May 15, 2020.***
- The mentee has attended New Teacher Academy or job specific PD totaling a minimum of 6 hours
- The teacher has been formally evaluated by administration

Signature of Induction Teacher: \_\_\_\_\_

Signature of Mentor: \_\_\_\_\_

Signature of Administrator: \_\_\_\_\_

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