

Administrator's Statement of Assurance for Standards Review Teams

The New Jersey Department of Education is seeking educators who have teaching experience in elementary, middle, or high school in one or more of the following content areas: 21st Century Life and Career Skills, Comprehensive Physical Education and Health, Computer Science, Science, Social Studies, STEM, Technology, Visual and Performing Arts, and World Languages. Selected educators should: have a deep understanding of standards-based instruction, be qualified to review the current version of the New Jersey Student Learning Standards, and be prepared to make recommendation regarding possible revisions. The purpose of this Statement of Assurance is for principals or superintendents to indicate their support of the educator named below and acknowledge that the educator will be allowed to fully participate in all required meetings.

A principal or superintendent who would like to recommend more than one educator should complete a separate Statement of Assurance for each educator.

Please email this completed and signed form to standards@doe.nj.gov by **November 6, 2018** (digital signatures are acceptable).

Recommended Educator:

Educator's First Name:

Educator's Last Name:

Educator's Current Role:

Email:

For which standards review team are you recommending this individual? Select all that apply.

21st Century Life and Career Skills

Comprehensive Physical Education and Health

Science

Social Studies

Technology

Visual and Performing Arts

World Languages

Other

Administrator Information:

Administrator's First Name:

Administrator's Last Name:

Administrator's Title:

Email:

School District Name:

School Name (if applicable):

Street Address:

City/Town:

State:

Zip Code:

Statement of Assurance

By selecting, "I agree" below, I am confirming that _____ is knowledgeable about
(Full name of educator)
standards-based instruction in the content area(s) identified above. I understand that educators
selected for review/revision teams will be expected to participate in monthly sessions with possible
additional time needed for virtual sessions or individual work.

I agree

I disagree

Print Name:

Signature:

Date: