

Required Endorsement

Required for all applicants requesting scholarship support from NMSBVI. The following document must be signed by district administrators with authority to allocate FTE and resources.

It is my understanding that _____ has submitted a letter of
(Teacher full name)
intent to participate in New Mexico School for the Blind and Visually Impaired's program for training of Teachers of Students with Visual Impairments (TVI) and/or Orientation and Mobility Specialists (O&M).

As the employer for _____ I have read and carefully reviewed
(Teacher full name)
NMSBVI Board Policy 464, which outlines this program's goals, requirements and obligations. I have also had an opportunity to ask questions to NMSBVI officials about the program and the obligations of the employer.

I fully understand that if _____ is accepted into this program,
(Teacher full name)
_____, as the employer guarantees that the job description of
(Name of school & school district)
the teaching staff receiving assistance under this program will be revised to include duties of the certification they gain through participation in this program.

I also certify that _____ will provide support for the teaching staff
(Name of school & school district)
receiving assistance under this program while in the program. This support may include providing on-line connectivity in the school and the necessary time to access on-line coursework. It may also include time from the classroom to attend on-site courses and complete assigned coursework.

If upon completion of this program _____ should be either
voluntarily or involuntarily separated from employment at _____, I agree to notify NMSBVI of the separation.

(Signature of School Principal) Date

(Signature of School District Superintendent)