The University of Texas at San Antonio

UTSA. Academic Innovation

Semester and Year _____

Course Instructor/Event Facilitator _____

Student Consent for Classroom and Other Educational Recordings

I, (the undersigned), understand that I am attending class sessions or events that may be recorded by any means including: audio, visual, transcripts/chat ("Recording"). I was informed or made aware of this by the instructor/facilitator before the start of the event. If the recording is in conjunction with a class, the instructor's syllabus may include a statement on recording the classroom instruction. I hereby permit UTSA to record my image, likeness and/or voice on a Recording and release education records that consist of my voice or likeness as I participate in these classes or events. I am consenting to allow these materials to be used for educational purposes, including for institutional review of instruction and/or for the education of other students. The recording may also be made as an accommodation approved by Student Disability Services to a student with a disability. I understand that I will receive no money or remuneration of any kind from the University related to any Recordings and hereby release UTSA, its governing board, officers, employees, representatives and agents from any and all claims and demands arising out of or in connection with the Recording. I acknowledge that I do not have the right to approve any materials developed by the university as authorized.

I understand that my consent here is independent of and separate from any other directive or consent I may have given to the University with regard to the release of my voice or likeness (such as for the release of Directory Information).

I understand my consent and release are voluntary and not a condition or requirement of my participation in this class or event.

_____ I agree to the above terms

_____ I do not agree to the above terms

Student ID Number: _____

Student signature _____ Date _____

Parent/guardian name if under 18 (please print)_____ Date _____

Parent/guardian signature if under 18_____ Date _____