**FERPA Consent to Release Student Information Relating to Classroom Recordings and Media Release**

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|  | **STUDENT INFORMATION** | |  |
| Name: |  | |  |
| Email: | | Student ID No: | |
| **CONSENT TO RELEASE INFORMATION** | | | |
| In connection with my participation in the following class:    Course & Section :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Course ID:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Semester:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  I understand that class sessions and projects may be audio and/or video recorded. I have no objection to NC State University using my voice, likeness or image for educational or promotional purposes, and I hereby permit NC State University to release the education records that consist of recordings of my voice, likeness or image as I participate in the class (such as when I am making presentations or asking questions in the class) and/or depictions in the recordings of presentation slides or other materials I have created for the class. This information may be released and viewed by third­parties. I am allowing this release of my education records for educational purposes and to allow NC State University to publicize and promote its educational programs and to further the education of other students. I waive any right to inspect or approve the finished electronic or printed matter and expressly release NC State University, its agents, employees and assigns from any all claims for invasion of privacy, right of publicity, defamation, copyright infringement, or any other causes of action arising out of the use, adaptation, reproduction, distribution, broadcast or exhibition of such recordings.    I also grant NC State University the irrevocable, royalty­free right (i) to use photographic, video or audio recordings or images of me and my materials, and (ii) to make such recordings or images available in NC State University’s print or electronic publications and promotional or educational materials. I understand that NC State University will hold the copyright in any such recordings or photographs.    There is no time limit on the validity of this consent and release. I understand my agreement is voluntary and is not a condition or requirement of my participation in the class or my attendance at NC State University.    \_\_\_\_ Yes, I agree to the above terms.    \_\_\_\_ No, I do not agree to the above terms.      Student Signature: Date: | | | |