**Student Consent Form – Sharing of Class Video**

This class is being recorded, and the recording will be made available online for students who can’t attend class and for students who wish to review the material that was discussed.

I would like to get your consent to use the recording in future classes or as part of a professional teaching portfolio. In some cases, your image or name may be visible in the recording. That is why I am asking for your consent. Here are some examples of how I may use the recording:

* Posting the entire video for students in a future version of this class or another class I teach.
* Posting part of the video to help students in a future class understand a concept or assignment.
* Using an excerpt as part of an online teaching portfolio or as part of a presentation or article about my teaching.

This form requests your consent to use the recording in the ways I describe above. I never use examples to embarrass or shame students, and your grade is *NOT* connected in any way to your participation. Finally, you are free to withdraw consent at any time, now or in the future, without being penalized.

*Please check the following designated purposes (if any) to which you give your consent:*

\_\_\_\_\_\_I am willing to have my image or name included if a class recording, or a portion of a recording, is used for the purposes above.

\_\_\_\_\_\_I ask that my image or name be blurred if the recording is used outside this class.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Course Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Professor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Additional restrictions on the use of my texts (please specify):*