



Please read and complete the following release agreements for the UOTeach Program.

1. Family Educational Rights and Privacy Act (FERPA) - Release Form for Photographs and Videos

The University of Oregon periodically takes photographs or videos of school classes, events, and other functions reflecting student life at the University. In some instances, the University may wish to publish those photographs and/or videos on its Websites, in school catalogs, in the school alumni magazine, and/or in other publicity materials, which may be viewed by the general public. If those photographs and/or videos contain enrolled students, they may be considered educational records under the Family Educational Rights and Privacy Act of 1974 (FERPA), and therefore generally cannot be used without the prior written consent of the students appearing in the photographs and/or videos.

By signing this form, you are giving the University of Oregon permission to use your photograph and/or appearance in a video for the purposes of, and in the media, listed above.

Student Name (Please Print)

Student Signature

Date

Comment:

2. Student Record Release Consent

Student records are protected by the Family Educational Rights and Privacy Act (FERPA), which governs the maintenance and release of information from those records. I, _____ (*full name*), hereby authorize the UO Education Studies Department to release all related job reference and academic reference information, to any prospective practicum placement, employer or academic institution who request the information for placement, hiring or admissions purposes. This includes oral and written communications of such information as academic study, dates of practicum/attendance, job duties, and quality of my job-related and/or academic-related performance.

I understand that this information is considered a student record. Further, I understand that by signing this release, I am waiving my right to keep this information confidential from the above personnel under the **Family Educational Rights and Privacy Act (FERPA)**.

I certify that my consent for the release of this information is entirely voluntary. I certify that I understand this consent to release can be revoked by me at any time in writing but will not be effective for materials already released under it. This release will remain in effect until and unless specifically revoked by me in writing.

Student Name (Please Print)

Student Signature

Date