Sample Consent Form for permit to record lectures:

_(Print Student’s Name here)_ is permitted to video or audio record the class lectures in __(Course number and title)_____. We have read and understand the conditions and limitations applying to recording lectures and fully agree to the following conditions and limitations:

1. Recordings of class lectures are solely for the student’s personal use in study and preparation related to the class.
2. The student will not share these recordings with any other person at any time, whether or not that person is in the same class.
3. The student will not sell the recording or profit financially from the recording.
4. The student acknowledges that the recordings are sources, the use of which is governed by the college’s recording policy, course syllabus and Student Handbook.
5. The student will destroy any recording that is made when the recording is no longer needed by the student for this course.
6. Student’s failure to abide by these provisions may result in loss of permission to record future class lectures.
7. Student will manage the recording device in a way that does not disturb others or call attention to the fact that the student is recording a lecture.
8. Student violation of this permission may constitute a violation of the Student Code of Conduct as outlined in the Student Handbook and result in disciplinary action by the University.

Signed ___________________________ Date ______________________
(Student)

Student ID# _______________________

Signed ___________________________ Date ______________________
(Faculty)

Course(s):

Date Permission Expires _______________________

Taken in part from http://www.cccti.edu/DS/Documents/AudiotapingClassLectures.pdf