

Consent for Specific Media Coverage Freedom of information and Protection of Privacy Branch

On	, representative	s from
		(name of media organization) ake an audio or digital recording of your purpose of this request is to:
		(or see attached
database and may be ad productions, broadcast, distributed in various me student name, and other in any public forum, the	dapted for other edu- re-broadcast, published ia formats to a nun didentifying persona Calgary Board of Ed	will become part of the media organization's cational or non-educational applications, hed, exhibited, reproduced, and/or nber of markets. Once photographs, I information and student work are released lucation cannot control or prevent the those who access the information.
celebration of school ach	nievements and the we recognize that th	organizations, within reason, to encourage sharing of information about students and here are instances where parents may not
with others. However, we	e recognize that the or independent stud	, this is an opportunity to share your work re may be instances where you do not wish dents/adults are under no obligation to o.
this activity. If you do no	t return this form, thi Iraw your permissior	fore the student/adult begins participation in is indicates a refusal to consent. You in at any time. If you wish to withdraw your in writing to:
(School principal or designation	ate)	
-		·····×·····×·····×·····×······×······×····
I, am the parent/legal gu student/adult, and I have	ardian of the studen e read and understar ary Board of Educat	dian or Independent Student/Adult at named below or independent and the information provided on this form. I ion permission to include my child or me in as described above.
Name of student (please pr	int)	School
Name of parent or legal gu	ardian (please print)	Signature of parent or legal guardian
Name of independent stude	ent (please print)	Signature of independent student
Date		