

Information Record Consent Form

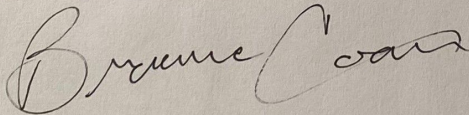
I authorize the Introduction to Software Engineering group *Team Nobody* the right and permission to copy, record, and process my responses to the following questionnaire. I understand that my responses will be reviewed to further the development of the *Team Nobody's* class project, and that my responses may be viewed by the affiliated professor and Teaching Assistants.

I acknowledge my participation in this questionnaire is voluntary and that I may, at any time, discontinue the questionnaire and void any previous responses. I acknowledge that I may, at any time, request that my previously recorded answers and information be removed from any and all system records.

I acknowledge my information will not be distributed to any third parties without being previously informed and giving signed consent.

By signing this form, I acknowledge that I have read and understood the above consent form.

PARTICIPANT SIGNATURE:

A handwritten signature in cursive script, appearing to read "Bryanne Coan".

DATE:

4/7/2024