

# Interview/Photo/Video Consent Form

May 2008

This information is collected and distributed in accordance with the *Freedom of Information and Protection of Privacy Act*, Sections 33, 34, 38, 39, 40, and 41.

## This Consent Form must be used when:

- interviews are undertaken or when photos, videos, or videoconferences are taken/used by the media or an outside organization and where individual students are identified by name or face.
- photos, videos, and videoconferences are taken where individual students are identified and the material is to be used for purposes outside the school.

I \_\_\_\_\_ hereby provide consent for \_\_\_\_\_  
name of parent/guardian/independent student name of student

to be:  interviewed  photographed  videotaped  tape recorded  other \_\_\_\_\_

## I/we have given this consent voluntarily.

\_\_\_\_\_  
Signature of parent/guardian and/or \_\_\_\_\_  
Signature of student if 18 years or older, or independent student

\_\_\_\_\_  
Signed at on \_\_\_\_\_  
Date

For further information concerning the completion of this form, please contact the principal of your school or Elk Island Public Schools' FOIP Coordinator, (780) 417-8204.



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by choice

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