

CONSENT FORM

Interviews, Photography and Recording for Student Projects

ACTIVITY/PROJECT TITLE: _____

DATE AND TIME: _____

STUDENT NAMES and CONTACT DETAILS:

1. I hereby give permission for these recordings ('the Recordings') to those authorised by Aberystwyth University ('the University') on this occasion:

- to interview me and take notes
- to record my voice
- to photograph me
- to video/film me

[check those that apply]

2. I agree that for educational/non-commercial purposes the University may use the Recordings:

as part of student coursework

- in which I will be anonymous;
- which will *not* be published outside the university;
- which may be published as part of student coursework on the university website.

[check those that apply]

3. I understand that the information provided will be treated in accordance with the UK Data Protection Act 1998.

NAME: _____

SIGNATURE: _____

ADDRESS: _____

TELEPHONE/EMAIL: _____

DATE: _____