



Los Angeles Unified School District
VIDEOTAPE RELEASE FORM
STUDENT TEACHER LESSON RECORDING

Date:

Dear Parent/Guardian:

_____, a student teacher who is seeking to meet state credentialing requirements, is requesting permission to video record portions of a class at _____ School in which your child is a student. This is a requirement of both their university and the California Commission on Teacher Credentialing. The video recording will be reviewed by _____, student teacher's university supervisor for the purpose of assessing their growth and development. The video recording will not be used for commercial purposes. In order to permit _____ to video record this teaching session, we are asking that you review this document and, if you understand and agree with the following, sign for permission. You are under no obligation to provide consent.

1. You are the parent or legal guardian of the child named below, and you have authority to enter into this agreement on his or her behalf.
2. You consent to allow _____ to film your child in this lesson. You also agree that the video recording becomes the property of the teacher and is only for the limited use described above.
3. You understand that there will be no financial compensation, and you waive the right to receive any monetary compensation for your child's image.
4. You waive the right to inspect or approve the finished video recording, in whatever form it appears.
5. You release, discharge and agree to hold harmless the photographer, the photographer's employees and agents, and Los Angeles Unified School District (the "District"), its employees and agents, from any and all liability arising out of this project whatsoever.

If you are in agreement, please sign below and return the portion of this form below the dotted line to the school by _____. Thank you.

Principal

I have read the description above and agree to allow my child's likeness to be video recorded as part of this class for _____, student teacher who is seeking to earn a California Teaching Credential.

Name of Student

Name of Parent or Guardian (Print)

Date

Name of Parent or Guardian (Sign)