

Marysville School District No. 25

**Consent to Photograph, Videotape or Audiotape Minor Child
Classroom-Based Performance Assessments or
Classroom-Based Assessments**

Student Name _____

School _____ Grade _____

Home Address _____ Phone _____

Parent/Guardian Name _____ Date _____

{PLEASE PRINT ALL INFORMATION}

[] I hereby grant permission to allow photographs, slides or videos to be taken of my student { } or myself { } or both { } as a participant in _____ {Activity} at _____ {Location}.

[] I hereby grant permission to allow photographs, audiotape or videos to be taken of my student as a participant in a Classroom Based Performance Assessment in Fine Arts, specifically, drama, dance, music or other performance arts or Classroom Based Assessments in Social Studies, Health, or Physical Education at a school location.

I understand that my student's photograph, audiotape or videotape is to be viewed by Marysville School District's teaching staff for the sole purpose of scoring performances for the Classroom Based Performance Assessments or Classroom Based Assessments. There will be no other public use of photographs, audio or video recordings.

Attention Principals/Teachers:

* If this child is a ward of the court (foster child), permission must be obtained from the caseworker.

*If photographs, slides or videos are to be used for ANY other public purposes other than in-district Classroom Based Performance Assessments or Classroom Based Assessments, the district form "Consent to Photograph / Videotape Minor Child / Consent to Public Work" must be used.

Parent/Guardian Signature _____

Date _____