Foreign Language Educators of New Jersey

Student Video Podcast Contest

Release Form for Students under 18 Years of Age

This form must be signed (by parent/guardian) and mailed by the nominating teacher to:
Lucy Lee, Livingston High School, 30 Robert Harp Drive, Livingston, NJ 07039

PLEASE CHECK CATEGORY:

☐ **1: Elementary: Pre-K—Grade 5**

☐ **2: Middle School: Grades 6—8**

☐ **3: High School: Grades 9—12**

The purpose of this form is to request permission of parents/guardians to use the video podcast of their children, submitted for a state-wide student video podcast contest sponsored by the Foreign Language Educators of New Jersey (FLENJ), a non-profit professional organization. The FLENJ web site (http://flenj.org) facilitates the submission and the evaluation of the student video podcast entries.

The purpose of the FLENJ student video podcast contest is to promote the teaching and learning of world languages in New Jersey schools. The podcasts of finalists and winners will be announced at the annual conference; the winning and final podcasts will be archived in an area of the FLENJ web site that can be accessed by visitors. The web site is open to the public at http://flenj.org. Only the first name will be used to identify students in the videos.

I, the undersigned, hereby grant permission for the video podcast entry of my child to be used and posted on the FLENJ web site. I understand that the videos of finalists and winners are to be archived on the Foreign Language Educators of New Jersey web site to promote the teaching and learning of world languages. The web site is open to the public at http://flenj.org. The video podcast shall be used for educational purposes only.

I hereby release FLENJ, their agents, personnel, directors, and officers from any claims or liability regarding any use that may be made of the video podcast in accordance with this consent and release.

Student Name: _____ Nominating Teacher's Name: _____
please print please print

School: _____
please print

Parent/Guardian Name: _____
please print

Parent/Guardian Email: _____ Telephone: _____
please print

Signature of Parent/Guardian: _____

Date: _____

The Nominating Teacher will mail the signed release forms to **Lucy Lee, Livingston High School, 30 Robert Harp Drive, Livingston, NJ 07039**.