



Foreign Language Educators of New Jersey Student Video Podcast Contest

Release Form for Students 18 Years of Age or Older

This form must be signed (by student 18 or older) and mailed by the nominating teacher to:
Lucy Lee, Livingston High School, 30 Robert Harp Drive, Livingston, NJ 07039.

**CATEGORY 3:
High School: Grades 9–12**

The purpose of this form is to request permission to use a student video podcast 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 my video podcast entry 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.

I certify that I am 18 years or older and have read this release and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

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

School: _____
please print

Email: _____ Telephone: _____
please print

Signature of Student 18 or Older: _____

Date: _____

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