**INTERVIEWEE PERMISSION AND RELEASE FORM**

I agree to be interviewed as a part of a student project coordinated by the University of Iowa’s Office of Outreach and Engagement. I also give permission for a video and audio recording to be made of my interview. I further agree to be photographed as part of my interview.

I authorize the video/audio recording of my interview and my photograph(s), including my name, image, and voice, to be used for educational, research, scholarly, and other non- commercial purposes of the University, including, but not limited to, exhibition, publication, presentation, and distribution in any medium and on the World Wide Web, and deposit in a permanent collection;

I transfer and assign to the University of Iowa any right, title, and interest I may have in the video/audio recording of my interview and in my photograph(s), including the copyright and any performance rights, and any right, title, and interest I may have in any works based upon, derived from, or incorporating the recording or my photograph(s).

I irrevocably waive any right that I may have to inspect, edit, or approve the video/ audio recording of my interview in any of its forms as well as any such rights relating to my photograph(s).

I irrevocably release the University of Iowa, its employees, agents, and assigns, from any and all claims that I may have at any time arising out of, or related to, the video/audio recording of my interview or my photograph(s) or its/their use, including, but not limited to, any claims based on the right of privacy, libel, or defamation.

Name of Participant

Signature of Participant

Date

Students/Group Name:

Instructor Name:

Semester and year: