

**Mississippi State University
Office of Clinical/Field-Based Instruction and Licensure**

**Parent Consent Form
Videotaping/Photography/Student Work**

PROJECT: Videotaping, taking pictures of students, and samples of work at
_____ **School as part of the teaching**
internship experience.

Teacher Intern: _____

Supervising Teacher: _____

Videos, photography, and samples of student work are often used as instructional tools, and may appear on bulletin boards, classroom and workshop presentations, web pages, multimedia presentations, and in student teacher portfolios. Names of students are not used.

Teacher interns are videotaping their own instruction as part of their evaluation process. It is impossible to do this without including students. No pictures, videos, or student work will be released to commercial enterprises for any purpose not directly related to educational activities.

Signing below means that you give permission for videos, your child's pictures, or work (without your child's name) to be used for educational purposes or in educational publications.

Student's Name: _____

Parent/Guardian Signature: _____

Date: _____