



Duke Ellington

school of the arts

Permission for Student Participation in the Media

I, _____ (print parent/guardian full name) give permission for my child, _____ (print student full name), to be filmed, photographed or interviewed by the media throughout their time as a student at Duke Ellington School of the Arts.

Parent/Guardian Signature _____

Date _____

Student's Art Department _____

Student's Graduation Year _____

This permission form is to be completed by the parent and returned to the Dean of Arts Office (Room 219) prior to any student participation, per Directive 311.6, District of Columbia Public Schools' Student Participation in Media.

For more information or to decline participation in media, please contact:

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