

Check one of the following choices:

WALL TOWNSHIP PUBLIC SCHOOLS

Office of the Superintendent of Schools P.O. Box 1199 • 1620 18th Avenue Wall, NJ 07719

Media Consent Form

In compliance with State law (A592), the **Media Consent Form** must be completed for each student in our school district. This law prohibits dissemination of student personal information without parent consent.

This parental consent form serves to both inform you and request permission for your child's photo/image/video and personally identifiable information to be published on the district, school, and/or class websites and social media.

As you are aware, there are potential dangers associated with the posting of personally identifiable information on a website since global access to the Internet does not allow us to control who may access such information. For this reason, the law requires that we ask for your permission to use information about your child. Although as a school district we like to celebrate the successes of our students, the posting of photos/names/videos is ultimately an individual decision made by parents.

Pursuant to law, we will comply with the level of permission that you indicate below regarding publishing information about your child on our websites and social media. If you, as the parent or guardian, wish to rescind or amend this agreement, you may do so at any time <u>in writing</u> by sending a letter to the principal of your child's school. Such changes will take effect upon receipt of written correspondence by the school.

I/We GRANT permission for this student's photo/image/video and name to be published on district sites, social media (Twitter, YouTube, etc.). I/We GRANT permission for a photo/image/video that includes this student, without any other personal identifiers, to be published on district sites and social media. I/We DO NOT GRANT permission for photo/image/video that includes this student to be published on district sites nor social media. From time to time, reporters visit our schools and take pictures of students that are published in the newspaper. Please indicate your preference below. Yes, I give permission to have my child's picture/video and name published in the newspaper/online news. Yes, I give permission to have my child's picture/video published in the newspaper/online news without any other personal identifiers. No, I do not give permission to have my child's picture/video or name published in the newspaper/online news. Additionally, the New Jersey Department of Education (DOE) asks for your permission to display photos/images/videos of my child on the DOE Web site www.state.nj.us/education and on social media (including, but not limited to, Facebook, Twitter, and Instagram). Yes, I give permission. No, I do not give permission.

In granting this permission, I understand that the DOE may use photos/images/videos of my child for purposes such as celebrating achievements and publicizing education events, as deemed appropriate by the Public Information Office, and that such use may include display in the DOE Photo Gallery and on social media. I further understand that, although school districts and/or schools associated with photos/images/videos will be identified, and that adults appearing in photos/images/videos may be named, my child's name or other personally identifiable information will *not* be used with any photo/image/video.

I am signing this release form with the knowledge that any photos/images/videos posted on the DOE Web site or on social media can be downloaded and reprinted by various news organizations, including print, electronic and broadcast media, and I, therefore, release the DOE from any liability arising from use of my child's photos/images/videos in DOE Web or social media postings. Additionally, as previously advised by the local school district, I understand that there are potential dangers associated with the



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posting of personally identifiable information on a Web site or on social media, since global access to the Internet does not allow for control of who may access such information.

I also grant the New Jersey Department of Education (DOE) the use of mine or my child's photos/images/presentations/videos/testimonials from participation of any programs.	
Yes, I give permission.	
No, I do not give permission.	
In granting this permission, I understand that the DOE may use my photos/images/presentations/videos/testin educational purposes to promote or use in future professional development, as deemed appropriate by the Pul Office and Deputy Commissioner of Education. I further understand that, my school district and/or schools a photos/images/presentations/ videos/testimonials will be identified, and that I may be named.	olic Information
I am signing this release form with the knowledge that any photos/images presentations/videos/testimonials purple where the downloaded and reprinted by districts and various news organizations, including print, electromedia, and I, therefore, release the DOE from any liability arising from the use of my photos/images presentations/videos/testimonials in DOE Web postings.	
I further understand that I will not be provided with any compensation for DOE's use of my photos/images/presentations/videos/testimonials from my participation in the professional development or tea any programs and I agree not to seek compensation from DOE for the same.	chnical assistance of
Student's Name: (please print) Grade:	
Parent/Guardian's Name: (please print)	
Signature of Parent/Guardian: (sign)	-
Relation to Student:	
Date:	