**AUDIO RECORDING OF COURSES AGREEMENT**

Some students with disabilities may need to audio recording of courses in order to support their learning. This serves as an agreement between student and professor that the student will abide by the policies listed in the *Audio Recording of Courses* policy and as a means to document an agreement regarding the possible retention of recordings.

By signing this agreement, the student agrees to abide by the policies below.

1. Record solely in pursuit of your educational program, not for any commercial or non-educational purpose.
2. Not engage in any undisclosed recordings of courses or interactions.
3. Not share these audio recordings with anyone, nor play them for anyone else. I agree that these audio recordings will be used only by me, and solely in pursuit of my educational program. I agree that I will not utilize these audio recordings for any commercial or non-educational purpose.
4. Erase the audio recordings within 14 days after issuance of a grade. In the event that I need to retain the audio recordings after the class has concluded, I will request written permission from the instructor. I understand that the instructor will decide whether I may retain the audio recordings for a longer period, and under what conditions.

Failure to abide by the above-mentioned policies will result in a report filed with the Office of Student Conduct, Rights and Responsibilities.

**ACKNOWLEDGEMENT OF STUDENT**

 **Department | Course | Section # Student’s Signature STUDENT’S NAME date signed**

**ACKNOWLEDGEMENT OF PROFESSOR**

**instructor’s signature INSTRUCTOR’S NAME Date signed**

**REQUEST TO RETAIN RECORDINGS AFTER CONCLUSION OF THE COURSE**

I request to retain the audio recordings under the following conditions, and for the following reason(s):

 **student’s signature Date signed**

**Decision of PROFESSOR**

**instructor’s signature Date signed**