

Oral Release Form

Record this statement at the beginning of an audio or video recording of an interview in the presence of the interviewee. Circle the documentation method(s) used.

This is	(Name of Interviewer)	
of		(Name of School)
in	(Town and Parish) on	(Date
I am interviewing, photographing, audio recording, or video recording		
	(Name	e of Interviewee).

Do you understand that portions of this interview may be quoted or used in a publication or exhibition for educational purposes? (Interviewee responds)