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| Consent for Video/Audio Recording |

NMIT / Te Pukenga

Supervisee Consent Form

CONSENT FORM

(For Video/Audio recording)

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| --- | --- | --- |
| Between |  | (Course Participant/Supervisor) |
|  |  |  |
| And |  | (Peer Supervisee) |

I agree/do not agree to this supervision session being videoed or audio -taped for the purpose of the course participant’s assignment. I am of the understanding that the tape will only be used for learning purposes.

10 minutes of the recording will be viewed by:

1. The NMIT / Te Pukenga course tutors

2. A small group of peers from the course in a structured evaluation session.

I also understand that it is the supervisor’s work that will be under scrutiny in any course assessment and not my story as shared and viewed in the recording.

I also understand that I have the right to ask for the recording to be turned off at any time.

I also understand that I can withdraw my participation in this session at any time up to 2 days prior to presentation to the group of peers.

I also understand that I will be consulted, and an agreement will be made with me with regards the storage and disposal of the recording once it has been marked.

I agree to participate in the assignment under the conditions set out above.

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| Signed: |  | |
|  |  |  |
| Name: |  | |
|  |  |  |
| Date: |  | |