



ACADEMY DC AFTER MAKIN MOVES PROGRAM CONSENT AND RELEASE FORM

Family Educational Rights and Privacy Act (FERPA) Consent

Grantee, except for LEAs, shall include Family Educational Rights and Privacy Act (FERPA) consent on the participant enrollment form that is signed and dated by the parent or guardian of the participant.

I (parent/guardian name) _____ hereby authorize and consent DCPS Office of the Chief of Staff, Office of the State Superintendent, or (name of school) _____ to provide information concerning the education of my child, (name of child) _____, to _____ (Grantee Name) and the DC Office of Out of School Time Grants and Youth Outcomes (OST Office). I further authorize the release of educational records of my child for the current school year to the parties listed above that include the following information: education transcripts, school/program enrollment information, universal student ID, address, demographic data, attendance data, credit history, grades, assessment data, IEP information, and graduation attainment (12th grade only). This authorization and release shall remain in effect from the date signed through my child's graduation from DCPS or a DC public charter school.

By signing below, 1) I acknowledge and understand that I have the opportunity to review the records to be disclosed and the right to challenge the contents of such records, and 2) I am at least 18 years of age, or I am signing this document on behalf of my child because he/she is not 18 years of age.

Survey of Academic and Youth Outcomes-Youth Survey (SAYO-Y) Consent

Grantee shall include SAYO-Y consent on participant enrollment form that is signed and dated by parent or guardian.

Creative Solutions 4 Youth/Center for Non-Profit Advancement is funded by the Office of Out of School Time Grants and Youth Outcomes (OST Office), a DC Government agency. As a grantee, we are required to share participant information with the OST Office that may be collected on the enrollment form such as full name, date of birth, school name, demographics, and age.

In addition, we are required to administer a questionnaire called the Survey of Academic and Youth Outcomes (SAYO-Y). The SAYO-Y is a brief survey with questions about what your child thinks of the program and of the potential benefits of attending the program. All information collected through the SAYO-Y is confidential and no individual child or their individual responses will be identified. Participation in the SAYO-Y is voluntary.

By signing below I give permission for (name of child) _____ to be included in the SAYO-Y survey.

I, the undersigned, in consideration of the foregoing and without further consideration, do hereby irrevocably grant the "CREATIVE SOLUTIONS 4 YOUTH INC", its affiliates, licensees, officers, employees, successors, assignees, agents and those for whom it is acting, my consent and the absolute, unrestricted right and permission to copyright, record, reproduce, broadcast, distribute, edit, publish, exhibit, sell, disseminate and use in any way throughout the world and in perpetuity the audio and/or visual portions of any videotape, film, pictures or other recordings of my performance or interview made in connection with the above-referenced program, and any reproduction thereof, for use through any medium or media and for advertising, publicity, promotion, trade, programming or any other lawful purpose whatsoever related thereto. Such right and permission shall be exercisable, in whole or in part at the sole discretion of CREATIVE SOLUTIONS 4 YOUTH INC, its affiliates, licensees, officers, employees, successors, assigns, agents and those for whom it is acting.

I hereby waive any right that I may have to inspect or approve any finished product, derivative thereof, or the use to which the finished product may be applied.

I hereby assign to CREATIVE SOLUTIONS 4 YOUTH INC. all right, title and interest in and to any video or audiotape, digital copy, film, negatives, prints, still or promotional material made in connection with the above for the exploitation by CREATIVE SOLUTIONS 4 YOUTH INC in any and all media now known or hereafter devised, along with full rights of assignment, subject to the terms of any applicable union agreements, if applicable.

I hereby agree to indemnify and hold harmless CREATIVE SOLUTIONS 4 YOUTH INC. its affiliates, licensees, successors, assigns, agents and those for whom it is acting, from any liability resulting from my statements and/or actions during my participation (whether such statements and/or actions are used).

I hereby release discharge and agree to hold harmless CREATIVE SOLUTIONS 4 YOUTH INC, its affiliates, licensees, officers, employees, successors, assigns, agents and those for whom it is acting, from any liability, including, without limitation, libel, defamation, including any right of privacy, publicity or personal injury arising out of the use of any portrait, picture, recording (digital, audio and/or visual) of me, or reference to me, or any scene or sequence in which my likeness or such reference appears.

I acknowledge that I have read and understand this Consent and Release prior to signing it. I further acknowledge that if I am under age 18, I must obtain the consent of a parent or legal guardian.

Full Name (Please Print)

Signature

Street Address, City, State & Zip Code

Phone Number

Date

I hereby represent that I am either the parent or legal guardian of the minor who has signed the above release and I hereby agree that we shall both be bound by the terms herein.