Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, as amended, require institutions of higher education to provide reasonable accommodations to students with documented disabilities. Some students with disabilities are unable to take adequate notes during class. Audio recording can be a reasonable accommodation for these students if it has been approved by Learning Accessibility Services.

Faculty have the option and right to require a student who audio records classes to sign an agreement stating the terms under which the recordings may be used and how long the recording may be kept prior to disposal. However, faculty may not withhold permission to record if audio recording of classes is necessary for accommodating a student.

Students are required to notify their instructors before audio recording classes. The audio recordings may be used only as a replacement for class notes. This agreement does not cover audio recording individual meetings or conversations outside of class.

I agree to the following terms for audio recording classes:

___ I understand that I have been approved to audio record classes for my personal study use only and no other purpose.

___ I understand that I am responsible for providing and operating the audio recording device.

___ I understand that I may not share the audio recordings with anyone else (including social media) or profit financially from these recordings or their content.

___ I understand that information contained in the audio recordings of classes is protected under federal and international copyright law and may not be published, posted or quoted without the instructor’s explicit written consent.

___ I understand that in some cases, audio recording may be prohibited, during portions of classes, at the discretion of the instructor, when the content involves personal discussion or self-disclosure.

___ I agree to delete these audio recordings no later than the end of the semester.

I certify that I have read and agree to follow the terms of this audio recording agreement in accordance with the spirit of the agreement.

____________________________________
Course Title/ Instructor Name

____________________________________  _____________________________________
Student Name (Printed)                                        Student Signature

____________________________________
Date