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**BSW Field Practicum**

**Consent for Recording**

**School of Social Work**

At (name of field setting), we often find it helpful to make audio/video recordings of sessions with social workers and service recipients. These recordings are valuable tools for education and supervision purposes - and can also provide another perspective when viewed by service recipients and students.

We recognize that service recipients have a right to decide whether or not they wish to have a session recorded. Therefore, recordings are made only with your consent.

I, (name of service recipients), hereby grant (name of student) permission to make audio/video recordings of interviews held with myself and/or my family, provided such recording will be used solely for educational or therapeutic purposes and will be erased after their intended use. ,I understand that these recordings will not be heard or seen by any person other than:

 the social work student

 the student's field instructor

 the student’s university field liaison or field education coordinator

 students and staff associated with the field setting

I understand that the need for confidentiality will be explained to viewers prior to viewing/ hearing recordings.

Signature of Service Recipient Please print name Date

Signature of Student Please print name Date