



Interviewee Photo and Video Consent Form

This authorization grants permission to use your image (still or moving) taken/recorded during the ___(xxth)___ AUN-QA Programme Assessment at _____(university's name)_____ (Online/Remote Site Visit) for the publication in any medium of the AUN-QA platforms.

By signing this document, you agree:

1. To allow the recording of your image(s) and to reproduce those image(s) for the publication in any medium of the AUN-QA platforms.
2. To allow the video recording during the interview session for AUN-QA Assessors' reference only. There will be no disclosure of the information with the university or any other third parties.

Please note that _____(university's name)_____ is authorized to sign the consent form on behalf of involved interviewees and stakeholders. By signing this consent form, the university is obliged to inform interviewees and stakeholders their binding conditions therein.

Signature _____

Name _____

Position _____ (Head of university's QA unit) _____

Date _____