**PARTICIPANT CONSENT FORM AND AUTHORIZATION TO RELEASE AND/OR USE OF RECORDS AND INFORMATION**

College of Computing Outreach: AP Bowl

TO: GEORGIA INSTITUTE OF TECHNOLOGY

FROM: (Name of Participant)

**BACKGROUND:**

The AP Bowl is a youth program sponsored by the College of Computing Outreach that helps to prepare high school students to take the AP Computer Science Exam. The program offers a range of tutoring and prep services followed by a full length, timed, practice exam. At the conclusion of the program, the students will be prepared to take the official AP Computer Science exam. The College of Computing Outreach requests that each participant of the program voluntarily disclose their official score on the AP exam so that the student and the program can compare improvement as a result of the preparatory program. Of the scores that are voluntarily disclosed, the College of Computing Outreach would post the top scores, all 4’s and 5’s, on its public facing website along with the student’s name, high school, and high school teacher. There is also the potential for the scores, names, and schools to be included in an article released by Institute Communications.

**AUTHORIZATION FOR RELEASE OF RECORDS AND INFORMATION:**

I hereby waive my privacy rights, including but not limited to any rights pursuant to the Family Educational Rights and Privacy Act, 20 U.S.C. §1232g(b)(2)(B), and grant my permission and authorize Georgia Tech and any of its employees or agents to release any and all of my records and information (hereinafter referred to collectively as “Records”) in its possession in accordance with the information below:

**The Records may be released to:**

The College of Computing Outreach

**The Records that may be released are:**

Participant’s AP Computer Science test score, participant’s first and last name, participant’s high school, and participant’s AP Computer Science teacher

**The Records may be released only for this Purpose:**

The Records disclosed will be used for the limited purpose of announcing the top AP test scores, the 4’s and 5’s, of the AP Bowl program participants on the College of Computing Outreach’s public facing website. There is also the potential that the Records may be included in a newsletter or article written by Georgia Tech’s Institute Communications Team.

I further request that you do not disclose any information to any other person or entity without prior written authority from me to do so, unless disclosure is authorized or required by law. I understand that this authorization shall continue in force until revoked by me by providing written notice to Georgia Tech. I further understand that a revocation cannot apply to the extent of any action(s) that may have already been taken in accordance with this “PARTICIPANT CONSENT FORM AND AUTHORIZATION TO RELEASE AND/OR USE OF RECORDS AND INFORMATION.”

By signing this “PARTICIPANT CONSENT FORM AND AUTHORIZATION TO RELEASE AND/OR USE OF RECORDS AND INFORMATION,” I hereby agree to indemnify and hold harmless Georgia Tech, the Board of Regents of the University System of Georgia, its members, agents, representatives, and employees (each of the foregoing being hereinafter referred to individually as the “Indemnified Party”) against all claims, demands, causes of action, actions, judgments, or other liability including attorney’s fees (other than liability solely the fault of the Indemnified Party) arising out of or in connection with this “PARTICIPANT CONSENT FORM AND AUTHORIZATION TO RELEASE AND/OR USE OF RECORDS AND INFORMATION.”

I have read, or have had read to me, the above statements, and understand them as they apply to me. I hereby certify that I am eighteen (18) years of age or older, suffer under no legal disabilities, and that I have freely and voluntarily signed this “PARTICIPANT CONSENT FORM AND AUTHORIZATION TO RELEASE AND/OR USE OF RECORDS AND INFORMATION.”

This the \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Participant Signature

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please print)

Parent/Guardian Signature (if participant is under 18 years of age)

Name:

(Please print)