

Nonprofit Interview Consent and Release Form

Participant Information

Name:

Date:

Email:

Interview Details

Project/Program Name:

Interviewer Name:

Consent and Release

- I voluntarily agree to participate in the interview conducted by the nonprofit organization.
- I understand that my responses may be recorded, transcribed, and used for purposes such as reports, publications, or promotional materials.
- I grant permission for my responses and likeness to be used by the nonprofit in various media and platforms.
- I understand that no compensation will be provided for my participation or use of my interview.
- I understand that my participation is voluntary and I may withdraw at any time.

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I have read and understand the above information and consent to participate in this interview.

Participant Signature

Date

Interviewer Signature

Date
