

Parent-Teacher Conference Recording Consent Form

This form seeks your consent for audio and/or video recording of the parent-teacher conference regarding your child. The recording will be used solely for documentation and educational purposes related to your child's progress.

Student Information

Student Name

Grade

Teacher Name

Parent/Guardian Information

Parent/Guardian Name

Conference Details

Conference Date

Consent

☐ I consent to audio recording of the conference. ☐ I consent to video recording of the conference.

☐ I do not consent to any recording.

Comments or Restrictions

Parent/Guardian Signature

Date

Teacher Signature

Date