

Oral History Interview Consent Form

Project Title:

Interviewer Name:

Interviewee Name:

Date of Interview:

Consent Agreement

I hereby consent to participate in an oral history interview conducted by the interviewer listed above. I understand that the purpose of this interview is for research, educational, and/or archival purposes.

- ☐ I understand that my participation is voluntary.
- ☐ I grant permission for my interview to be recorded and stored.
- ☐ I grant permission for my interview materials to be used for the stated purposes.

Confidentiality

The interview and its related materials will be handled as follows:

Interviewee Signature

Signature: _____

Date: _____

Interviewer Signature

Signature: _____

Date: _____