



# TEXAS A&M INTERNATIONAL UNIVERSITY

Disability Services for Students  
Student Center 118  
Phone (956) 326-3086; Fax (956) 326-2231

## AGREEMENT FOR RECORDING CLASS ACTIVITIES

I, \_\_\_\_\_, understand that as an enrolled student with a documented disability that affect my ability to take or read notes at Texas A&M International University, I have the right to audio record my class lectures for use in only my personal studies. I realize that these recorded class activities **may not be shared with other people without the consent of the speaker(s), and may NOT be used in any way against the faculty member, other lecturers, or students whose classroom comments are audio recorded as part of the class activity.** I further agree to the following:

- To notify the course or section instructor prior to recording.
- To comply if the professor requests that I stop recording during discussions, demonstrations, guest speakers or other situations of a sensitive nature that do not contain information affecting my course competencies or grade.
- If I want to keep audio recordings for future review, I understand that I must obtain written permission from the instructor and provide a copy of this permission to the DSS office.
- To not duplicate and/or distribute audio recordings to other individuals, to social media, or any online sources/websites, etc.
- I am aware that information contained in the **audio recording(s) is protected under federal copyright laws and may not be published or quoted without the consent of the speaker or without giving proper identity and credit to the speaker.**

I have read and understand the above agreement on recording class activities, and I pledge to abide by the policy with regard to any activities I record while enrolled as a student as Texas A&M International University. I understand that a violation of this agreement may subject me to discipline under the Code of Student Conduct or subject me to liability under copyright laws.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

DSS Coordinator \_\_\_\_\_ Date \_\_\_\_\_