

The University of Rhode Island
Office of Internships and Experiential Education
Roosevelt Hall, 90 Lower College Road, Kingston, RI 02881

CONSENT FORM FOR PUBLICATION

You have been asked to submit pictures and brief testimony regarding your internship for publication on the URI OIEE web site. You should feel free to ask questions. If you have further questions contact Kimberly Washor, (401-874-2160) who will discuss them with you.

Description of the project:

Providing testimonial support to encourage students to participate in the URI Internship Program.

What will be done:

You will submit pictures and written summaries describing your experience at your internship placement site. If co-workers are included in the pictures submitted, you will confirm with them that they permit you to submit that picture for the URI OIEE web site. The pictures and testimonials will be reviewed and if any changes need to be made they will be brought to your attention before the information is placed on the web site.

Risks or discomfort:

We expect that there will be no risk or discomfort resulting from participation.

Benefits of this publication:

By participating you will be encouraging other URI students to participate in an internship.

Confidentiality:

Your name and the name of your agency will be listed. Please confirm that the agency supervisor is comfortable with the pictures and content you submit.

You have read the Consent Form. Your questions have been answered. Your signature and your agency supervisor signature on this form means that you both understand the information and you agree to participate.

Signature of participant

Signature of Agency Supervisor

Signature of OIEE Staff

Printed name

Printed name

Printed name

Date

Date

Date
