



### **TAPE RECORDING AGREEMENT**

Professor/Instructor: \_\_\_\_\_

Student: \_\_\_\_\_ ID #: XXX-XX-\_\_\_\_\_

Class: \_\_\_\_\_ Term: \_\_\_\_\_

Students with Disabilities who are unable to take or read notes have the right to tape record class lectures for their personal study only. (84.44 of Section 504 in the Rehabilitation Act of 1973 P.L. 93-112, amended P.L. 93-516).

The tapes are to be used solely by the student signing this form and only for individual study for this class. Lectures taped for this purpose may **NOT** be shared with other people without the consent of the lecturer. Tape-recorded lectures may not be used in any way against the faculty member, other professors, or students whose classroom comments are taped as a part of the class activity. Information contained in the tape-recorded lecture is protected under federal copyright laws and may not be published or quoted without the express consent of the lecturer and without proper identity and credit to the lecturer.

### **STUDENT PLEDGE**

I have read and understand the above agreement on tape-recorded lectures. I pledge to abide by the above policy with regard to any lectures I tape while enrolled in this class.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Professor/Instructor: \_\_\_\_\_ Date: \_\_\_\_\_

Any Questions?  
Contact OSSSD  
631-420-2411

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