PARTICIPANT NAME:	
Name and Surnam	ne e
Prep4Success Participant Consent & Release Form	
In connection with the Prep4Success Program its program implementing partners to photogra image and/or voice, presentations, and course public information programs and activities.	ph, film, or otherwise record and use my
Additionally, I hereby authorize Prep4Success publish, or quote such material, including my ninformation programs and activities.	
With respect to this material, I understand that content may be included in future speeches, on the internet, social media, and through multiple broadcast channels and print media (which may include use by U.S. Embassies abroad to promote U.S. Department of State exchange programs and public diplomacy efforts) but that such content will not be used for commercial purposes.	
I understand that I may decline to give my consent (by not signing this form) and still continue to participate in all program activities without being disadvantaged with respect to those activities.	
Participant's Signature	Date
Name/Surname	_
Email Address	_
As the parent or legal guardian of the Program part authorizations on behalf of my minor child or ward. 18 years old)	
Parent's/Guardian's Signature	Date

Name/Surname