

The Writing Center at College of the Sequoias requests your permission to record your session with our consultant today. This recording will be used anonymously, and only for the purpose of consultant training and development. If this is acceptable, please sign the statement below.

I hereby consent to have my consultation recorded and transcribed for the purpose of consultant training and development.

Signature

Date

Printed Name

.....
For Consultant Use

Consultant Name

Session Date

Session Time

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