

Release for Testing of Minors

Dear Parent and/or Guardian,

In order to maintain the security and highest degree of academic integrity of the tests it administers, PSI Services LLC and its affiliated companies ("PSI") employ various mechanisms that authenticate the candidate's exam experience, including but not limited to

- (i) taking a picture of the candidate's face
- (ii) taking a picture of the candidate's ID (when available)
- (iii) recording screen shots and key strokes of the computer on which the candidate takes the exam for monitoring by PSI's trained exam proctors, and potential later review by PSI or its client exam sponsors
- (iv) recording audio and video images of the candidate and his/her exam environment during the exam for monitoring and review by PSI's exam proctors.

Pictures, videos, and audio recordings captured by PSI before, during, and after an exam will be used by PSI and its certified video review specialists to monitor, administer and proctor the candidate's examinations. PSI will not re-disclose the information above, except to its certified video review specialists and other appropriate personnel, including examination sponsor officials, as required to maintain, monitor, and preserve the integrity of the examination. The information will be destroyed or anonymized within six (6) months of its date of capture, or when the information is no longer needed for proctoring purposes, whichever date is earlier.

If you wish to revoke your consent, you may do so by contacting PSI in writing, and providing PSI with any requested information (e.g., candidate name, date and location of exam, etc.). You have the right to inspect records for which your consent was given. To do so please contact PSI as to the process.

Before PSI can take these pictures, videos or recordings, however, it needs the permission of the minor candidate's parent or guardian. By signing this form, you will give PSI permission to take the photographs, videos and recordings of your child required to authenticate his/her examination experience. Children without signed releases will not be permitted to sit for an exam. PSI appreciates your understanding and cooperation.

I hereby grant PSI Services LLC, and its affiliates, assigns, successors in interest, employees, designees, and those acting on behalf of PSI Services LLC (collectively, "PSI"), the right to take or record audio, pictures, and/or video (collectively, "Images"), and other personally identifiable information of the minor exam candidate identified below (the "Child"), while the Child is an exam PSI is administering, and to use the Images and other personally identifiable information for the purpose of monitoring, administering, proctoring, or providing technical support of examinations.

I represent and warrant that I have read this release, that I am a parent or legal guardian of the Child and I understand that PSI would not use the Images without first receiving a copy of this release signed by a parent or legal guardian of the Child, as set forth below.

This release shall survive the execution and delivery hereof and shall be binding on the Child, its legal representatives, heirs, and assigns.

Print Parent/Legal Guardian Name: _____

Signature: _____

Date: _____

Print Child's Name: _____

Address: _____

City/State/Zip: _____

School & Grade: _____