Authorization of Release Information

I, (WIOA Participant Name) hereby authorize the Local Workforce Innovation Area 26. (LWIA #26) and or the contracted service providers Shawnee Development Council, Inc. (SDC) or Wabash Area Development, Inc. (WADI) to use information regarding my WIOA involvement, including written information, program information, photographs, success stories, and videos.

I authorize the LWIA #26 or contracted service providers SDC or WADI to release relevant material for use in publications, press releases, or on the internet. As a result of this, I waive any claim arising out of such releases.

The dissemination (or use) of any released information, photographs, success stories, and videos shall not be used for any for-profit commercial use.

This release will be in effect for LWIB #26 or their service providers SDC and WADI for the term of one (1) year from the signature date.

Participant Signature Date

 Parent/Guardian Signature (if under 18) Date