

MITS

MADANAPALLE INSTITUTE OF TECHNOLOGY & SCIENCE

(Deemed to be University under section 3 of UGC Act, 1956)

Madanapalle-517325, Andhra Pradesh, India

Declaration Form for E- Content Preparation

PERSONAL INFORMATION:

Name of the Faculty : _____

Designation : _____

Staff ID No. : _____ Department: _____

Phone Number : _____ Email: _____

CONTENT/ MODULE/ LECTURE DETAILS:

Title of the Content/ Module/ Lecture:

Specialization/ Content Playlist:

Date of Appearance: _____ Time In: _____ Time Out: _____

DECLARATION AND AGREEMENT:

I, _____ [Full Name], hereby declare that I have voluntarily approached the MITS Radio 90.8 CRS for E-Content preparation for developing above-mentioned Content/ Module/ Lecture entitled _____

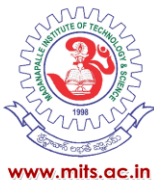
[Title of the Content/ Module/ Lecture]. I understand and agree to the following Terms and Conditions:

1. Content and Participation:

- I have voluntarily approached MITS DTBU for E-Content preparation.
- I will engage in open and respectful discussion during the E-Content preparation.
- I will provide accurate and truthful information to the best of my knowledge.
- I acknowledge that while the slides, GIF, animations, images, content, audio, and video are my original creation, the institute shall not be responsible for the content, description, or presentation of ideas within the work. I assume full responsibility for the same.

2. Slide Preparation, Content, Video and Audio Recording and Usage:

- I consent to the slide, presentation, video and audio recording of my appearance on the E-Content development.



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- The Content/ Module/ Lecture entitled _____
_____ [Title of the Content/ Module/ Lecture] that I am submitting to the institute is my original content.
- The slides, presentation, video and audio content I contribute to the institute during this E-Content development is intended for use in any related social media channels/handles.

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4. Declaration:

I, _____ hereby declare that will not disclose any confidential or sensitive information during the program that could harm individuals, organizations, or reputation. I have read and understood the terms and conditions outlined above, and I agree to abide by them.

Signature of Faculty: _____ Date: _____



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HOD Verification and Permission:

I, _____, Head of the Department, Department of _____, hereby declare that I have reviewed and verified the quality of the submitted e-content PowerPoint presentation, ensuring proper figure credits, content courtesy, references, and compliance with copyright requirements. I grant permission to record the verified content. I also acknowledge that minor alignment adjustments, format corrections, or slide number updates, if necessary, may be carried out by the radio station representative.

Signature of HOD: _____ Date: _____

Radio Station Representative's Signature: _____ Date: _____