



MITS RADIO 90.8 MHz COMMUNITY RADIO STATION

MADANAPALLE INSTITUTE OF TECHNOLOGY & SCIENCE
MADANAPALLE – 517325, ANDRA PRADESH



Declaration Form for E- Content Preparation

PERSONAL INFORMATION:

Full Name of the Faculty: _____

Designation: _____

Staff ID No.: _____ Department: _____

Phone Number: _____ Email: _____

Social Media Handles: _____

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 am voluntarily approached the MITS Radio 90.8 CRS for E-Content preparation.
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- I will provide accurate and truthful information to the best of my knowledge.
- I acknowledge that while the slides, animation, images, content, audio and video is my original creation, MITS Radio 90.8 CRS shall not be responsible for the content, description, or presentation of ideas within the work. I assume full responsibility for the same.



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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 slides, presentation, video and audio content I contribute to MITS Radio 90.8 CRS during this E-Content development is intended for use in any related social media channels/handles.
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- I grant MITS Radio 90.8 CRS permission to use any content I provide solely for the purposes of the social media sharing.
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- I confirm that I own or have the necessary rights to any content (including slide, images, animations and other copyrighted materials) that I may provide or use during the preparation of E- Content.

4. Confidentiality:

I 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]:

Signature: _____ Date: _____

[Radio Station Representative's Signature]:

Signature: _____ Date: _____