



Field Image Showcase Submission Form

Section A - Participant Details

First Name: _____

Last Name: _____

Name of University: _____

BSW: ____ **MSW:** ____ **PhD:** ____ **Postdoctoral:** ____

Title of Submission: _____

Email: _____

Signature: The undersigned agrees to, and accepts, the terms and conditions of the TFEL Field Image Showcase

Participant Signature:	Printed Name:
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Section B - Image Submission

An original and unpublished image that depicts/reflects your perspectives and experiences in social work field placement, coursework and/or research experience. The image must be presented on PowerPoint slide.

Section C - Narrative

A narrative that describes your image and how it relates to your learning experiences in placement or with research (Maximum 1200 characters including spaces).

Would you like to participate in the Field Image Virtual Showcase on December 1st, 2020?

Yes / No

By submitting this form, I hereby confirm that:

1. By participating, the student consents to the use of his/her name, address (city and province/territory), images and narrative without further remuneration or notice, in connection with any publicity carried out by or on behalf of the Sponsor with respect to the showcase.
2. I am the owner and copyright holder of the above-submitted photo/image.
3. The Sponsor respects your right to privacy. Personal information collected from entrants will only be used by the Sponsor for promotional use in relation to the project and, only if consent is given at the time of submission, to provide students with information regarding upcoming promotions and/or events from the Sponsor. For more information regarding the manner of collection, use and disclosure of personal information by the Sponsor, please visit the Sponsor's Privacy Policy at www.ucalgary.ca.

Email form to tfelproject@gmail.com