



**NYU SCHOOL OF MEDICINE  
NYU LONG ISLAND SCHOOL OF MEDICINE  
STUDENT HANDBOOK INSERT:  
VIDEOS, PHOTOGRAPHY AND USE OF MEDIA**

NYU Langone may at times obtain and/or use photographs, audio, and/or video recordings to connect and share with students, staff, faculty and the general public for purposes of education, marketing, publicity, fundraising, and student recruitment on behalf of NYU Langone, via the Internet, print publications, social media and other media. Photos and videos of NYU Langone students and facilities can enhance reputation and support medical school student recruitment efforts.

These representations help us showcase quality, attract philanthropy, and maintain relationships with alumni. The use of this media may occur while you are at NYU Langone, or after you leave the institution. “NYU Langone” includes NYU Langone Health System, NYU Langone Hospitals (including all inpatient and ambulatory facilities), NYU School of Medicine, NYU Long Island School of Medicine, and all entities that are controlled by them, except where specifically excluded.

**CAMPUS EVENTS AND PUBLIC SPACES**

Potential subjects of pictures or videos taken during campus events or in public spaces generally have minimal expectations of privacy. Photos and video taken in these settings often include pictures of speakers and presenters, crowds at athletic events, and institutional events such as graduation, family weekend and annual commencement.

Images and videos taken in public spaces and/or at public events do not require authorization for publication. Your presence in or around NYU Langone facilities and/or properties, as well as at off-campus university-sponsored events, constitutes your consent to the capture and/or use of your image and/or voice by NYU Langone, and waives any claims or rights, whether in law or in equity.

**STUDENT OPT-OUT**

NYU Langone students can opt out of providing general photo permission during the registration process each semester. Students (or the parents or guardians of such persons who are under the age of 18) who do not want to be photographed or recorded, or have their name or information used in connection with any such recording, must submit a completed Media Opt-Out Form (located at the end of this document) and submit it to the Office of Students (“OOS”) and the Office of Communications and Marketing (“OCM”) via email to [medli.students@nyulangone.org](mailto:medli.students@nyulangone.org).

Opting out is best done before a picture or image has been taken or published. If a student decides at a later date to revoke photo permissions, the student should complete the



Media Opt-Out Form included at the end of this document and provide the OOS and the Office of Communications and Marketing (“OCM”) with information on the specific photos or videos that they want removed. The OCM will attempt to remove related media from the NYU Langone website and social media channels within 120 days of receipt of the student’s Media Opt-Out Form. Please note that we cannot be held responsible for the takedown of media on non- NYU Langone websites and social media channels.

Students who submit a completed Media Opt-Out Form are responsible for removing themselves from areas in which photography and/or video is taking place, or notifying the camera operator of their opt-out status. Students who do not want their image used in marketing materials should opt out and also remove themselves from NYU Langone marketing group photos. Failure to do so may result in that student’s inclusion in a photograph or recording and will be treated as consent for NYU Langone to use that photograph or recording accordingly.

When a completed Media Opt-Out Form is on file, NYU Langone will make every effort to honor that student’s opt-out status, even in public spaces or at public events. In the absence of a completed and submitted media opt-out form, a student releases and discharges NYU Langone from any and all claims and demands arising out of or in connection with the use of aforementioned photographs, audio, and/or video recordings, including without limitation any and all claims for libel or invasion of privacy.



**NYU School of Medicine  
NYU Long Island School of Medicine  
MULTI-MEDIA OPT-OUT FORM**

Student Information:

Name \_\_\_\_\_  
\_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_  
\_\_\_\_\_

NYU Langone, may at times obtain and/or use photographs, audio, and/or video recordings to connect and share with students, staff, faculty and the general public for purposes of education, publicity, and student recruitment on behalf of NYU Langone, via the Internet, print and digital publications, social media and other media. The use of this media may occur while you are at NYU Langone, or after you leave the institution. “NYU Langone” includes NYU Langone Health System (“System”), NYU Langone Hospitals (including the NYU Langone Hospital – Brooklyn and NYU Langone Orthopedic Hospital), NYU School of Medicine, NYU Long Island School of Medicine, and all entities that are controlled by the System.

*As a student at NYU Langone, you have a right to opt out of inclusion from photography and videos for marketing, communications, fundraising and public relations purposes. If you **do not** opt out, you acknowledge that your voice, name, and/or likeness may be used, without compensation, in photographs, video and other recordings being taken on campus and may be used and distributed, without further consent, in any and all media used or engaged by NYU Langone, including in publications, websites, marketing materials, social media, brochures, invitations, books, newspapers, etc., for the above purposes.*

**If you wish to opt out and do not want to have your photograph, video or other recordings used by NYU Langone, please check the box below, sign where indicated, and submit this form as follows: (i) as instructed via the orgsync system for NYU School of Medicine and (ii) via email to the Office of Students at NYU Long Island School of Medicine [medli.students@nyulangone.org](mailto:medli.students@nyulangone.org). Alternatively, you must check the box below, sign where indicated below and return this form via postal mail to NYU Langone Office of Communications and Marketing One Park Avenue, 5th Floor, New York, NY 10016, [news@nyumc.org](mailto:news@nyumc.org) and to your respective student affairs office as follows: (i) NYU School of Medicine Office of Student Affairs at 550 First Avenue MSB Ground Floor New York, NY 10016, or (ii) NYU Long Island School of Medicine Office of Students at 101 Mineola Boulevard, Floor 2, Suite 2-084.**



*Please contact the Office of General Counsel (ext. 47385 or 646.754.7385) if you have any questions about this form or general questions on the use of photos and videos.*

IF YOU ARE ELECTING TO OPT OUT, PLEASE CHECK THE BOX AND SIGN YOUR NAME ON THE LINE BELOW:

**I do not consent** to the use by NYU Langone of photographs, videos and/or other recordings taken of me.

I have read and understand this document and have freely signed below.

\_\_\_\_\_  
Student signature (required)

\_\_\_\_\_  
Date