

# Central Otago Oral History Project



## FILE 01 IDENTIFICATION FORM

***The following is to be read out and recorded at the start of each interview:***

This is an interview with ..... (full name)

for the Central Otago Oral History Project

recorded at ..... (place but not address)

On ..... (date)

The time is .....

The interviewer is ..... (your name).

I am using a Zoom H5 recorder and AKG C417PP clip on microphones

There is background noise from .....  
(or state if there is no background noise).

### **This is File number 1.**

Before we begin the oral history interview (*name of interviewee*) I just want you to confirm that you understand that this interview is being recorded as part of the Central Otago Oral History Project.

The recording and accompanying documentation will be held at Central Stories Museum, in Alexandra, and with your permission published on the Central Otago Oral History website.

Access to and use of the recording and accompanying documentation will be subject to the conditions and any restrictions stated in the Recording Agreement which we will sign at the end.

Are you happy about that and willing to continue? (*Interviewee answer*).