

THE EPA ALUMNI ASSOCIATION
Oral History Program
Interviewee Release Form

The Oral History Program of the EPA Alumni Association (EPA AA) aims to preserve the history of programs, decisions, and events associated with the U.S. Environmental Protection Agency (EPA) through the recollections of those who have participated in these programs, decisions and events. Our mission is to ensure that current and future generations of scholars, researchers, EPA employees, and interested individuals are able to understand these programs, decisions, and events from the perspectives of the women and men intimately involved in them, as recorded in their own words.

I agree to be interviewed by a representative of the EPA AA or to participate in a multi-party interview/discussion, as the case may be, on or about 4/19/2012. I understand that my oral history interview will be made part of EPA AA's collections and will be available for educational, non-commercial use. I also understand that this document is intended to inform me fully of what I am being asked to do and of my rights as an interviewee.

The Oral History Interview

This interview will be recorded as scheduled. Once my interview is complete, it will be edited into suitable segments and may be combined with photographs and other material to enhance the attractiveness and usefulness of the interview to future users. I will be given an opportunity to listen to view the interview and to ask that portions of it be deleted from the recordings made available to users. At that time I will have the opportunity to place restrictions on access and reproduction of the interview if I so desire. No one outside of the Oral History Program, its affiliates, and Interviewer(s) will be able to access or use my interview until these edits are made.

My Rights

I understand that I have the right not to answer any of the questions asked of me during the interview should I consider them uncomfortable or inappropriate. I do not have to state a reason for not wanting to answer any of the questions. My participation in this interview is completely voluntary, and I am free to withdraw consent and cease all participation in this interview at any time without any consequences whatsoever.

Risks, Benefits, and Costs

EPA AA knows of no risks or negative consequences associated with participation in this interview, and neither I nor the EPA AA will receive any direct benefit from my participation, but I am fully aware that others might somehow benefit from the knowledge I provide in this interview for EPA AA's oral history collection. I understand that there is no cost to participate in this interview, and I will not be paid for my time.

My Obligations

Once the Oral History Program has made the recordings available to me, I agree that (a) I will respond with any edits to EPA AA within two (2) months and that (b) should I not respond within that time, I agree that EPA AA may complete the processing of the interview and make it available in accordance with the Oral History Program's normal practices. I also agree that if I should die or become incapacitated before I have reviewed the interview and responded, my legal representative shall be given the opportunity to listen/view the interview, to ask that portions of it be deleted from the recordings and to place restrictions on access and reproduction of the

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interview. If my legal representative does not respond within two (2) months, I grant permission for EPA AA to complete the processing of the interview and make it available in accordance with the Oral History Program's normal practices.

Ownership

All rights and title to and interest in the recordings, transcript, photographs, and memorabilia, including the literary rights and copyright, shall be owned by the EPA AA, which pledges to maintain the recording and transcript and make them available in accordance with general policies for Association members and for research and other scholarly and educational purposes.

Permission to Post Interview on the Internet

Subject to any restrictions that I or my legal representative specify, I grant permission to post my entire interview, reflecting my edits, on the internet, to broaden individuals' access to the EPA AA's oral histories generally, and my oral history specifically. I understand that by granting permission to post my interview on the internet, EPA AA will not be able to limit anyone's access to or use of my interview in any way outside the bounds of U.S. Copyright Law under title 17 of the United States Code.

Questions or Concerns

Should I have any questions or concerns about participating in the creation of this oral history before or during the recording of the interview, or about the processing of the transcript, I can contact the Executive Director of the EPA Alumni Association:

Charles Elkins
Executive Director, EPA AA
628 Chester River Beach Road
Grasonville, MD 21638
202-686-3518
EPAalumni@aol.com

Agreement

I have read the information contained within this release form. I hereby consent to participate in this oral history interview.

(Signature) 
Interviewee Name

(Printed Name) Lee M. Thomas

(Date) 11/16/12

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I agree to be an interviewer of former Administrator, Lee Thomas, representing the EPA AA or to participate in a multi-party interview/discussion, as the case may be, on or about Apr 19, 2012. I understand that the interview will be made part of EPA AA's collections and will be available for educational, non-commercial use. I also understand that this document is intended to inform me fully of what I am being asked to do and of my rights as an interviewer.

The Oral History Interview

This interview will be recorded as scheduled. Once the interview is complete, it will be edited into suitable segments and may be combined with photographs and other material to enhance the attractiveness and usefulness of the interview to future users.

My Rights

My participation in this interview is completely voluntary, and I am free to withdraw consent and cease all participation in this interview at any time without any consequences whatsoever.

Risks, Benefits, and Costs

EPA AA knows of no risks or negative consequences associated with participation in this interview, and neither I nor the EPA AA will receive any direct benefit from my participation, but I am fully aware that others might somehow benefit from the knowledge provided in this interview for EPA AA's oral history collection. I understand that there is no cost to participate in this interview, and I will not be paid for my time.

My Obligations

I agree to conduct the interview in a fair and balanced manner and in accordance with the standards set forth by the EPA AA Oral History Program. I further agree that I will not discuss or disclose the interview or its content to anyone or entity except to members of the EPA AA Oral History Program. After the interview is posted on the internet, I am allowed to discuss the interview that is posted but am not allowed to discuss, use, or disclose any portions of the interview that has been deleted from the posted interview.

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(Signature) Helga B. Butler
Interviewer Name

(Printed Name) HELGA B. BUTLER

(Date) Nov. 16, 2012

Interviewee: Lee Thomas Signer: K. Clough Date of Interview: 19 April 2012
by K.G. Clough (Interviewer)

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I was an interviewer of former Administrator Lee Thomas, representing the EPA AA, on April 19, 2012. I understand that the interview will be made part of EPA AA's collections and will be available for educational, non-commercial use. I also understand that this document is intended to inform me fully of what I am being asked to do and of my rights as an interviewer.

The Oral History Interview

This interview was recorded as scheduled. Once the interview is complete, it will be edited into suitable segments and may be combined with photographs and other material to enhance the attractiveness and usefulness of the interview to future users.

My Rights

My participation in this interview was completely voluntary, and I am free to withdraw consent and cease all participation in this interview at any time without any consequences whatsoever.

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EPAalumni@aol.com

Fax# 202-686-3518

Agreement

I have read the information contained within this release form. I hereby consent my participation in this oral history interview on these terms.

(Signature) Kerrigan D. Clough
Interviewer Name

(Printed Name) Kerrigan G. Clough

(Date) 19 April 2012