

WRITTEN CONSENT for Participants

(Music Engagement Program- Parents)

I have read and understood the Information Sheet you have given me about the MEP program and the research project, and I have had any questions and concerns about the project (listed here

_____)
addressed to my satisfaction (*if you had no questions or concerns, leave this space blank*).

I agree to allow my child to participate in the MEP sessions. YES NO

I agree to allow my child to participate in the research project (i.e. fill out surveys, participate in interviews, provide feedback on their experience and feelings)

YES NO

It is possible to manage the extent to which your child can participate in the research aspect of the project. Please consider the boxes below and indicate the extent to which you and your child are comfortable with our collecting data.

I agree to my child engaging in:

Completion of written/ online surveys YES NO

Interviews/ MEP sessions which are audio-recorded YES NO

Interviews/ MEP sessions which are video-recorded YES NO

Focus group discussions which are audio recorded YES NO

Informal feedback discussions (staff may take notes) YES NO

Photo opportunities individually YES NO

Photo opportunities in a group YES NO

I agree to my child being identified in the following way within research outputs or promotional material (full names will only be used for professional development of promotional material. In research output, participants are always anonymous or using a pseudonym):

Full name YES NO

Pseudonym YES NO

No attribution YES NO

Child's name:

Parent/guardian name:

Signature: