

# Parental Consent Form

## Child Participation in Educational Research Survey

Child's Full Name

School Name

Grade/Class

Parent/Guardian Full Name

Relationship to Child

Parent/Guardian Email

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I hereby give permission for my child to participate in the educational research survey.

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I understand participation is voluntary and we may withdraw at any time.

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I understand my child's responses will be kept confidential.

Parent/Guardian Signature

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Date