



NATIONAL CHILDREN'S COMMISSIONER – School Consultations

Consent form for Parent/Carer

Please complete this form and return to your school by **30 August, 2019**

I

(please print name)

declare that I have legal responsibility for

(please print name of child)

And that I am legally competent to give consent to his/her participation in the National Children's Commissioner's **My Health Record consultations** on **Monday 2 September 2019**. The aim of the consultation is to talk to students about their rights under the new My Health Record system. The information gathered during this consultation will be used by the National Children's Commissioner to produce a series of educational resources that teach children about their digital health rights and enable them to make informed decisions about how to use the My Health Record system when they turn 14.

In giving my consent,

- I am happy for my child to participate in the National Children's Commissioner's My Health Record consultations.
- I have read the information about the project (see above) and understand what is involved.
- I have discussed participation in the project with my child and they are willing to take part.
- I understand that the National Children's Commissioner, Megan Mitchell, is conducting the consultation and that Australian Human Rights Commission staff and teachers may also participate.
- I understand that what my child says during the consultation may be quoted or referred to by the National Children's Commissioner for the purpose of her work. For example, on the Australian Human Rights Commission website or in a public report produced by the National Children's Commissioner. I understand that my child's name or any identifying information **will not** be used in relation to these quotes. If information my child provides is included in a public report, it will be published under a Creative Commons license and the contents of the report will be able to be used freely for other purposes.
- If my child says something during the consultation that indicates a child may be at risk of harm, the Australian Human Rights Commission staff or other adults involved in the project may report this information to the police or child protection authorities.

(Please tick 'Yes' if you agree and 'No' if you do not agree):

- I agree to quotes from my child being used in the National Children's Commissioner's public reports, or on the Australian Human Rights Commission website, or in other materials and for any of the Commission's purposes, but that my child's name and other identifying information will not be used. Yes No

- I agree to my child's photo being taken and used in the National Children's Commissioner's public reports, or on the Australian Human Rights Commission's website or in other materials and for any of the Commission's purposes, but that my child's name and other identifying information will not be used. Yes No
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Details of Parent/Carer

Name:

Signature:

Date:

Phone:

Email: