## **Animal Guardians parent/carer consent form**

Please read the points below and tick the box if you agree:

I am happy for my child to participate in the Animal Guardians programme

I am happy for routinely collected information to be used for the purposes of a study

First name:
Surname:
Relationship to child:
Main contact number:
Email:
Information of referred child
First name:
Surname:
Age:
Gender:
School:
Year/class:
Home post code:
Animals currently in the household:



Teased or frightened an animal
Physically harmed an animal
Rough handling of an animal
Unable to understand an animal's emotions and its behaviour
Unable to respect an animal's space and boundaries
Cut whiskers/fur off an animal
Witnessed harm to an animal
Killed an animal
At risk of harming an animal
Removed wildlife from its home
Other
Please expand and give as much reason as possible for the referral:
I understand that I will now be contacted by a youth engagement officer regarding this referral to discuss any additional requirements or pertinent information.  I understand that the Scottish SPCA will hold my personal data on their systems for as long as is necessary for the Animal Guardians programme.
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Date: / / Signed:

Please tick any of the concerning behaviour(s) the child has shown towards

any animals:

## Parent/carer study consent form

Please tick one:
I <b>AM</b> happy for my child to take part in the study
I am <b>NOT</b> happy for my child to take part in the study
If you are happy for your child to take part, please read the following statements and tick to show you agree.
I have read and understood the information provided in this booklet.
I understand that the data collection will be undertaken in the form of a pre and post study questionnaire.
I understand that ALL data will be anonymised.
I understand that the data will be fully anonymised in any subsequent research reports.
I agree to keeping a record of this form and results of the data collection until a period where they are no longer required.
Parent/carer's full name:
Child's full name:
Date: / / Signed:

