Dear Parent/Guardian,

[Organization name] is offering [Program name and short description].

To find out how successful this program is, we plan to ask children/youth who are taking part in the program to complete a short survey.

The survey will take about [5] minutes to fill in. The survey will not ask for your child’s name. Your child’s answers will be entered into [name] survey platform, where they will be combined with other children’s answers, to prevent third parties from guessing your child’s identity from their responses.

Your child’s participation in the survey will help the [Organization name] to understand and demonstrate how our goals for the program are being achieved. Information collected will be used by program staff and to study and improve the program’s impact.

Participation in the survey is voluntary. The purpose of the survey will be explained to your child, and they will be allowed to skip the survey if they don’t want to take part. If they decide to fill in the survey, they can skip questions or leave the survey incomplete.

As a parent/guardian, you can choose whether your child is invited to fill in the survey. If you do not want your child to fill in the survey, there will be no consequences. Your child will still participate fully in the program, and their relationship with program staff will not change.

By consenting to your child’s participation in this survey you are consenting to the collection of your child’s survey answers by [Grantee name] and our use of your survey answers for the purposes described above. We may also share the data with external researchers and evaluators, for the purposes of evaluation and program improvement. There is a small chance that someone at [Grantee name] will be able to identify your child, based on your child’s survey response. Please keep this in mind when deciding whether to consent to your child’s participation in the survey.

[Grantee name] will maintain your child’s survey answers in accordance with our data privacy policy applicable to the security, retention and disposal of data.

If you have any questions about this survey, please contact [person responsible for data collection], at [email address].

Name of child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of parent or guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I agree that my child may participate in the survey(s).

I DO NOT wish my child to participate in the survey(s).

Parent/Guardian signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_