

**CONSULTATIONS ON CHILD SAFE ORGANISATIONS PROJECT**

**Consent form for Child/Young Person**

# Would you like to participate?

I

(*please print name)*

agree to take part in the consultations on the National Children’s Commissioner’s **Child Safe Organisations project.** My parents/carers have agreed for me to take part in the consultations as well.

I know/understand *(please tick the box):*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. What I need to do at the consultations and the time it will take. | Yes |  | No |  |
| 1. It is okay for me to stop being part of the project whenever I want to. | Yes |  | No |  |
| 1. If something makes me feel upset during the consultations, the project will be stopped. My parents/carers will be told and we will be given the names of people I can talk to about what is making me upset, if that is what I want to do. | Yes |  | No |  |
| 1. What I say will be written down or video/audio recorded. | Yes |  | No |  |
| 1. What I say might be quoted in a report prepared by the Australian Human Rights Commission on their website or in their newsletter. If it is used, I will not be identified and my name will not be used. | Yes |  | No |  |
| 1. The only time you would have to tell someone what I said is if you were worried:  * that I might be badly hurt by someone * that I am not being cared for properly * that I might hurt myself * that I might hurt someone else. | Yes |  | No |  |

I agree that my photo may be taken and may be used in reports or other work completed by the Australian Human Rights Commission. If used,I will not be identified and my name will not be used.

YES NO

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|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| My name: |  | | | | | |
|  |  | | | | | |
| My age: |  | years and | |  | | months |
|  |  |  | |  | |  |
| My signature: |  | | Date: | |  | |
|  |  | | | | | |
| School/centre: |  | | | | | |

If you need any support completing this form or have any questions please contact Sam Champion, Participation & Development Coordinator at Youth Affairs Council Victoria (YACVic) on 03 9267 3702 / 0438 072 200 or at pdc@yacvic.org.au

Thank you for your help!