

## Inverclyde Educational Psychology Service

Young Person's Consent form  
Data Protection Act 1998



<b>Young person's name:</b>	<b>Date of birth:</b>
<b>Address:</b>	<b>Telephone number(s):</b>
<b>Post Code:</b>	
<b>School:</b>	

**I agree** to take part in the evaluation of the Seasons for Growth programme.

**I understand** that any information collected will kept confidential and anonymous.

<b>Young person:</b>	<b>Date:</b>
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