**APPENDIX F PARENTAL/GUARDIAN CONSENT FORM**

**Parent/Guardian**

I give permission for my Child ……………………………………….. to attend

any activities or outings organised by the Home or educational establishment

whilst accommodated at …………… Children’s Home

Signed :………………………………………………………( Parent/Guardian)

Date: ………………………………

I give permission for my Child ……………………………………….. to be given

First Aid and Homely Medication whilst Looked After at ………………. Children’s Home.

Signed :………………………………………………………( Parent/Guardian)

Date: ………………………………

I agree to the use of door alarms at ………… Children’s Home in the context of a Risk Assessed need to keep my Child safe.

Signed :………………………………………………………………( Parent/Guardian)

Date: ………………………………

I agree to Independent Visitors contacting me periodically, for my views on the Quality of Care at ………………… Children’s Home

Signed……………………………………………………………. (Parent/Guardian)

Date: ………………………………

I understand the risks that smoking poses to my Child’s health. I give

permission for my Child ……………………………………….. to smoke whilst

Looked After at ………………………Children’s Home.

Signed :……………………………………………………( Parent/Guardian)

Date: ………………………………

**CHILD’S AGREEMENT FORM**

**Name……………………………………**

I have been informed of the risks associated with smoking and understand that this causes damage to my health and may kill me. I will comply with the Smoking Policy of the Home.

Signed: ………………………………………………………………….. (Child)

Date: ………………………………………………………………………

The purpose of Regulation 44 visits and other inspection visits by Ofsted has been explained to me by……………………………….

and I give/do not give consent for Regulation 44 visitors to read my personal files and any other information about me held at ……………………. Children’s Home

Signed :………………………………………………………………..( Child)

Date:…………………………………………………………………….