

Adding information from administrative education records - children (4-15 yrs)

Please read this form and sign below if you give your permission for us to add information from education records to your child(ren)'s survey responses. It is completely up to you which permissions you choose to give. You can withdraw your permission at any time in the future.

I have received a leaflet explaining what education data may be added to the survey and how it would be used. I have had the opportunity to ask questions.

EDUCATION DATA (children aged 4-15 only)

I authorise ISER to provide the minimum amount of my child's personal details (full name, full address, date of birth and gender) to, depending on the nation(s) in which my child has been educated, the Department for Education in England; the Department for Education and Skills in Wales; Education Analytical Services in Scotland; or the Department of Education / Education and Skills Authority in Northern Ireland so that my child's educational records held by them can be identified. They will then create a link between my child's education record and my survey responses and those of my child (aged 10-15) before making the record anonymous. The education record will be placed on a secure computer so that researchers can use it for the purposes of research and statistics. My child's personal details will not be used for any other purpose and my dealings with the education authority will not be affected.

Please write your initials to indicate that you give permission

	First Name	Last Name	P.No	D.O.B dd / mm / yyyy	INITIALS
Child 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child 3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child 4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child 5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you give permission for us to collect any of this information please sign below. Your permission will stay in place unless you write to us to say you want it removed. This is detailed in the information leaflet. We will remind you of the permissions you have given periodically. You can contact the research team on, **Freephone 0800 252 853** or by writing to **Freepost RRXX-KEKJ-JGKS, Understanding Society, University of Essex, Wivenhoe Park, Colchester, CO4 3SQ**

Respondent

Sign Date Print name

Interviewer

Sign Date Print name

Serial	Address	HH.No	P.No	ChkL
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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