



Office for Professional Learning
Armidale, NSW 2351 Australia
Telephone (02) 6773 3898
www.une.edu.au

INFORMATION AND CONSENT FORM PRE-SERVICE TEACHER USE OF WRITTEN OBSERVATION AND PHOTOGRAPHS OF CHILDREN

Dear *(insert parent/guardian name)*,

I am a pre-service teacher at the University of New England, studying for a Bachelor of *(insert degree title; BECP, BT ECE, Bed EC)*. I am currently completing a unit *EDEC (insert unit code and name): PrEx (insert number of days) days*. As part of my work in this unit I am required to identify several focus children (guided by my centre supervising educator) to *(insert activity to be undertaken, for example, observe and document children's learning, play and interactions, then implement appropriate planning)*.

Your permission is sought for your child to be observed and for photographs to be taken of your child's play and interactions. No identifiable photographs will be taken of your child, and first names only will be used. The notes taken on child observations and the photographs of play and interactions will be used for the purposes of professional learning and assignment completion only.

Please complete and return this consent form, if you agree to your child's involvement as outlined above.

With thanks,
(insert pre-service teacher name and signature)

I give permission for my child to be observed by a pre-service teacher for academic and professional experience purposes only.

Yes No

I give permission for photographs of my child's play and interactions to be taken by a pre-service teacher and used for academic and professional experience purposes only. I understand no identifiable photographs will be taken of my child.

Yes No

Child's Name: _____

Parent/Guardian Name: _____ Signature: _____ Date: _____

Pre-service Teacher Name: _____ Signature: _____ Date: _____

Supervising Educator Name: _____ Signature: _____ Date: _____