

ECD Quality Toolkit Pilot Project 2016 Permissions Form

Purpose

This form is for practitioners and centre principals or managers to sign, asking permission for us to use the information that we get from the visit in a report about the pilot.

Please note that the information collected from a site visit is **confidential** in that we will not attribute specific comments to an **individual by name**, or to a **centre or school by name**. We are however asking permission to say that your site took part in this pilot.

Name of Site	
Mediator name	
Mediator organisation	
Practitioner name & contact details	
Principal name & contact details	

I give permission for the results of this interview to be used in the report on the ECD Quality Pilot. I give permission for photographs to be taken and used on the basis of agreements made during the visit.

Practitioner signature	
Principal signature	
Date	