



Scottish Youth Parliament Consent Form for:

AMPLIFYING CHILD SAFETY ONLINE PROJECT WORKING GROUP

This form must be completed by every young person who wishes to participate in the Scottish Youth Parliament's (SYP's) Amplifying Child Safety Online project working group. It should be completed, signed and sent to the project lead, Lucie Paradis, at lucie.p@syp.org.uk. Lucie is also the main point of contact for any questions or concerns you may have about participating in the project.

Please note: this form will be kept securely until six months after the end of your participation in the working group, in line with SYP's [Privacy Policy](#). Information provided on this form will be used by SYP staff to assist with planning, and during events in case of an emergency. Please contact Lucie if your details change.

Activity Details	
Activity Title: Amplifying Child Safety Online Project Working Group	
Start date: July 2025	End date: March 2026
<p>What will participation look like?</p> <p>Joining the working group for this project will require you to be available for regular online meetings and quarterly in-person events from July 2025 - March 2026 (see the project information sheet for more detail). Key activities will include carrying out project planning, delivery, and evaluation tasks, in collaboration with other working group members. You may also choose to facilitate Autumn co-design workshops with young people in regional voice groups. You will be supported to facilitate these activities confidently and aligned to SYP's safeguarding principles.</p> <p>Participation in any activity or discussion is always voluntary. If at any point you feel uncomfortable talking about the topics at hand, you are not required to participate and can withdraw consent at any time. SYP staff members will check in consistently to make sure you are comfortable and informed.</p>	
<p>Risks of participation:</p> <p>Being part of this working group will allow you to share your views and directly lead on a national-scale project to improve child safety online in Scotland. It is an opportunity to</p>	

ensure that decisions about how to keep children and young people safe online take into account the perspectives and experiences of actual children and young people, fulfilling the UNCRC Article 12 right to be heard.

Throughout project activities, you will be asked to share your views and collect other young peoples' perspectives on topics related to child safety, harm and abuse online. Although we encourage you to share your views and opinions as a project leader and participant, we encourage you not to share anything you do not want to share. Anything you share can also be withdrawn at any point.

SYP staff will support you in designing sessions that, while interactive, allow participants to respond in a variety of ways, with options to write or draw if you would prefer not to speak. Where possible, quiet spaces and access to outdoor spaces will be made available at all in-person events.

Your personal wellbeing will always be of utmost importance during project activities. SYP staff will also be able to contact support workers (for MSYPs) or your named trusted adult/carer on your behalf if you need to speak to them at any point during a session.

All activities at the Scottish Youth Parliament are carried out in line with our robust safeguarding and child protection processes, to ensure the work we do is safe, accessible, and inclusive.

SYP's Participation Framework:

All SYP participation work is underpinned by our Participation Framework. This was developed using the good practice tools created during [*The Right Way*](#) project, with the Lundy Model of Participation as its basis. Developed in partnership with young people, it focuses on three main components:

- Voice and influence - We support young people to have their voices heard and influence change that improves the lives of Scotland's young people and raises awareness and promotes the UNCRC.
- Personal development - Participating in SYP supports young people to develop appropriate and relevant skills, knowledge, and experiences. As a working group member, you will develop your skills in project planning, delivery, and evaluation methods, as well as your interpersonal skillset as part of a collaborative team. Throughout the project, SYP staff will support you in identifying and recording the skills you have employed and developed through your active participation.
- Incentive and reward - Participants and stakeholders are recognised for their participation in our work, through personal development, accreditation, and

appropriate remuneration where possible. All expenses will be paid throughout the duration of the project, so you should never be out of pocket.

Confidentiality:

Your data will be held in accordance with SYP's [privacy policy](#). If you disclose anything to a staff member or a member of SYP that could put you at risk, we will pass this on sensitively and urgently to the relevant people to support and protect your best interests.

Information and insights gathered during project sessions will be stored in Word and Excel documents (as relevant) via password protected SYP Teams folders. Any quotes and responses we gather through the project will be made anonymous, so you will not be identifiable in any of the findings or in the final report.

Details of Young Person

First name:	Surname:
Preferred name(s):	Date of birth:
Gender:	Pronouns:

Address:

Phone number:

We want to know how we can support you to have the best possible experience of this project. Please provide as much detail as possible of any dietary, accessibility, religious, or information support needs, to help us make sure this project is accessible for you.

Is there anything else you think we need to know?

(Please provide as much detail as possible)

Emergency contact details - Please provide at least two.

EMERGENCY CONTACT 1

Name:

Relationship to young person:

Address:

Landline number:

Mobile number:

EMERGENCY CONTACT 2

Name:

Relationship to young person:

Address:

Landline number:

Mobile number:

Media consent

Photos and videos may be taken at Scottish Youth Parliament events and activities. Please indicate below which statement you agree to.

Please choose **one** option only.

- ☐ I am happy for photographs/videos to be taken of me at this Scottish Youth Parliament activity, and used in national and local SYP publicity, communications, publications or digital channels (eg websites, social media).
- ☐ I am happy for photographs/videos to be taken of me during this Scottish Youth Parliament activity for use within SYP only, not used for national and local publicity, communications, publications or digital channels (eg websites, social media).
- ☐ I do not wish any photographs/videos to be taken of me at this Scottish Youth Parliament event / activity.

Agreement - Please tick all boxes and sign.

- ☐ I confirm that the above information in this form is correct, and I will inform the Scottish Youth Parliament in the event of any of these details changing.
- ☐ I agree to the information provided in this form being used for event and activity planning and delivery, in line with the SYP data protection policy.

Signed by young person: _____ **Date:** _____

If young person is under 16, this form must be countersigned by their parent / carer:

- I give consent for my young person to participate in the event/activity listed on page 1 of this form.
- I recognise that in line with SYP's child protection policy, young people under the age of 16 must be accompanied by a parent or other adult when travelling to in-person activities. SYP will cover the costs of travel and accommodation for this adult. The adult does not need to attend events.

Signed by parent/carers (if young person is under 16): _____

Relationship to young person: _____ **Date:** _____

SYP Declaration

I confirm that the participant (and their parent/carers if applicable) was given an opportunity to ask questions about the project, and all the questions asked by them have been answered correctly and to the best of my ability. I confirm that the individual has not been coerced into giving consent, and the consent has been given freely and voluntarily.

A copy of this form has been sent to the participant (and their parent/carers if applicable).

Print Name of SYP staff member: _____

Signature of SYP staff member: _____ **Date:** _____