



### Child / Young Person Details

- **Name:**
  - **Date of Birth:**
  - **Year Group / Class:**
  - **School / Setting:**
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### Parent / Carer Details

- **Name(s):**
  - **Relationship to Child:**
  - **Telephone:**
  - **Email:**
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### Consultant Details

**Name:** Katrina Mallon

**Role:** Education Consultant

**Organisation:** Destined for Greatness NI

**Email:** katrina@destinedforgreatnessni.com

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### Purpose of Consent

Your child's school/setting has requested support from an external Education Consultant to help meet your child's Social, Behavioural, Emotional and Wellbeing (SBEW) needs.

Support may include (as appropriate):

- Observation of your child in school
- Consultation with school staff
- Advice on strategies, interventions, and reasonable adjustments
- Support planning using trauma-informed approaches
- Liaison with relevant professionals as part of a Team Around the Child (TAC), where agreed

All work will be carried out in line with safeguarding guidance and school policies. A member of school staff will be present during any work involving your child.

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### Information Sharing

To provide effective support, it may be necessary for the Consultant to:

- Access relevant school records and reports
- Discuss your child's needs with key school staff

- Contribute to multi-agency planning where appropriate

All information will be treated as **confidential** and only shared where necessary to support your child or where required by law.

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### Consent Statement

Please read carefully and tick to confirm your agreement:

- I give consent for Katrina Mallon to work with my child as outlined above.
  - I understand that this support is advisory and consultative in nature.
  - I consent to relevant information being shared between the Consultant and the school/setting for the purpose of supporting my child.
  - I understand that I may withdraw this consent at any time by notifying the school.
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### Parent / Carer Declaration

I confirm that I am the parent / legal carer of the child named above and that the information provided is accurate.

**Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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### School / Setting Confirmation

**Name:**

**Role:**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_