



## **Providing Opportunities for Lifelong Learning Grant Program**

### **Data Collection: Parent/Guardian Consent**

Dear Parent or Guardian:

This letter is being sent to you today because your child(ren) participates in an afterschool and/or summer program funded by the South Carolina Afterschool Alliance. We want to learn how afterschool and summer programs can be exciting, interesting, and assure that the program is of high quality and has a positive impact on children. This voluntary survey and data collection is being led by companies called Public Profit and Hello Insight who were chosen by the South Carolina Afterschool Alliance to evaluate the services your child(ren) receives through their participation in their afterschool and/or summer program.

Your child(ren) will be invited to fill out an online or paper survey at the beginning and end of each program cycle. These surveys measure the impact of the program on your child's development and capture your child's experiences within the program, allowing us to make critical improvements to meet their needs. All children involved in Providing Opportunities for Lifelong Learning funded programs will be invited to participate in the surveys and data collection.

We are requesting permission for your child(ren) to participate in satisfaction surveys along with the release of information about your child's attendance, test scores and grades, which the South Carolina Afterschool Alliance will collect from the South Carolina Department of Education.

#### **What are we asking your child to do?**

- Children in the afterschool and/or summer program will be asked to take a 20-minute survey.
- Your child(ren) will be invited to complete the survey in a group setting online or on paper.
- Participation is completely voluntary. You and your child(ren) have the right to terminate their participation at any time or refuse their participation entirely without jeopardy to their status in the program.

#### **What are the benefits to taking the survey?**

Your child will be able to think about his or her learning and what they get out of attending the after school and/or summer program. Additionally, the adult staff will learn more about your child's interest and experiences in the program and they will be able to incorporate activities to meet their needs.

#### **Are there any risk or discomforts in taking the survey?**

The South Carolina Afterschool Alliance and the evaluation team will not share your child's name or any other details about individual children in the reports that will be written. Your child(ren) will help us learn how to improve afterschool and summer programs. The information collected could help make afterschool and summer programs better in your community and South Carolina holistically.

(please turn page over and complete the back of this sheet)

**How is my child’s confidentiality protected?**

All data gathered and analyzed will be gathered through an online platform called Hello Insight. Your child’s name will not be associated with data in Hello Insight’s platform and kept confidential in a secure database. The South Carolina Afterschool Alliance and its evaluation team will never use your child’s name for any reason related to this data, and all data displayed through this system will highlight combined or group results.

**Who do I contact if I have questions about the survey?**

If you have questions regarding this survey or the process, you may contact Hello Insight at [support@helloinsight.org](mailto:support@helloinsight.org). or Michelle Nimmons, Director of Grants and Contracts at [mnimmons@scafterschool.com](mailto:mnimmons@scafterschool.com).

If you agree that child(ren) can take the survey and participate in the data collection process, please sign, and return this form by \_\_\_\_\_ 2022.

**Agreement**

**Please check whether you give permission for your child(ren) to take the survey about their experiences in the afterschool and/or summer program.**

**Yes, I agree** to let my child take the survey.

**No, I do not agree** to let my take the survey.

**Please check whether you give permission for the SC Afterschool Alliance to obtain information from the SC Department of Education about your child(ren) participating in the afterschool and/or summer program.**

**Yes, I agree** to release school information about my child to the SC Afterschool Alliance.

**No, I do not agree** to release school information about my child to the SC Afterschool Alliance.

Name of child #1 (Please print clearly.) \_\_\_\_\_

First, Middle and Last Name

Child #1 age \_\_\_\_\_ and grade \_\_\_\_\_

Name of child #2 (Please print clearly.) \_\_\_\_\_

First, Middle and Last Name

Child #2 age \_\_\_\_\_ and grade \_\_\_\_\_

Parent/Guardian, please PRINT your name here \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_