



Student Consent Form

Applicant/Student Name: _____

Applicant/Student Date of Birth: _____

Programme: **BA in Social Care**

I (applicant/student name) _____ **consent OR do not consent (please circle your option)** to participate in the activities involved in delivery of the BA in Social Care course. I understand that the material collected during these activities will be used for information/assessment purposes only and will not be used for any other purpose. I understand that I can withdraw my consent to participation in these activities at any stage and that an alternative format for the gathering relevant information/assessment will be agreed.

Signature: _____

Date: _____

Note: This consent is valid for the duration of your studies on the BA in Social Care.