PARENTAL CONSENT FORM

Dear Sir/Madam,

Your child's class will participate in an educational project within the framework of the European eTwinning platform. eTwinning is a European action which offers teachers in participating countries the possibility to establish partnerships in order to carry out online educational projects with their pupils using digital tools. eTwinning is part of the European Erasmus + program. The purpose of this release form is to obtain the parental or legal guardian consents to capture and use images, photographs, voice recordings, video files and works of students, within the framework of the eTwinning project.

**1. Description of the educational project**

Your child will participate in the eTwinning educational project **“SMILE – School of Magic Inspiring Learning Experiences”**.

Description of the educational project:

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| --- |
| SMILE is a replica of Hogwarts, designed for young teenagers who are interested in magic, learning and personal growth. SMILE aims to create a virtual school community – based on the positive psychology principles - to learn, grow character strengths, communicate, collaborate and create together in mixed nationality groups. Students will read the book one from the Harry Potter series, learn about a different school environment and immerse themselves into positive full of adventures and challenges learning experiences, that would lead to the development of communicative, collaborative, computer and information literacy, science and civic competences and personal growth of the students. |

This project may include:

• products (photographs, videos, voice recordings, etc.);

• student works or artistic creations (drawings, photographs, texts, videos, sounds, etc.).

These products and works can be photographs, images, audio and videos recordings, etc. showing students alone or in groups.

Duration of the project (start and end dates): **school year 2020-2021**

The photographs, audio and video recordings as well as student’s products and works will be created under the authority of the educational institution.

Name and address of the educational institution (hereinafter referred to as the **beneficiary**):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Use of the student’s data**

All the photographs, voice and video recordings, products and works will be published in digital format and the dissemination media is - Internet network (World Wide Web) / Intranet / Extranet / via the virtual secure collaborative workspace "Twinspace". The purpose of collecting, publishing and storing images, photographs, audio and video recordings, works and products is for educational, non-commercial use.

**3. Parental consent**

I, the undersigned Madam / Sir [Name(s) and surname(s)]: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ legal representative of the minor whose identity is designated in paragraph 4 below, authorizes the beneficiary within the framework of the project identified in paragraph 1 above, to film, voice record, photograph and / or interview the minor designated below, as well as to use their student work or artistic creations under the conditions defined in paragraph 2 above. The use and storage of recordings and student work or artistic creations will be carried out exclusively under the conditions provided for herein without infringing on the minor's privacy, dignity or reputation. I declare that I am the legal representative of the designated minor and I guarantee that the minor that I represent is not bound by an exclusive contract relating to the use of his image, his voice, his student work or artistic creations and / or his name. No remuneration or consideration of any kind whatsoever will be granted to the minor and to myself. I acknowledge having read the above information and authorize, free of charge and exclusively, the beneficiary to carry out the capture and use provided for herein within the exclusive framework of the project set out in paragraph

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

Signature(s) of the legal representative(s) of the minor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We thank you for completing the form below authorizing the use of the photographs and voice recordings of the minor you represent, as well as any work carried out by this minor, according to the operating methods indicated in this consent.

**4. Student Consent**

Name and surname of the student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_ The context and objectives of this project have been explained to me and understood by me

\_\_\_\_\_\_\_ I agree that my student work or artistic creations to be used in the eTwinning project

described in paragraph 2.

Student Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_