

THE GENERIC BC SCHOOL DISTRICT

*Consent for Psychoeducational Assessment*



NAME OF STUDENT: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

This **informed consent** checklist for a psychoeducational assessment is intended to help ensure that you have been adequately informed about the assessment before consenting to it.

Please check the appropriate boxes:

|  |      |     |
|--|------|-----|
| 1. I am the parent or guardian of this student, and I am legally able to give consent on behalf of this student.   | Yes: | No: |
| 2. I have discussed with school personnel <b>the purpose and nature of a psychoeducational assessment.</b>   | Yes: | No: |
| 3. I have been informed of <b>the benefits and the risks</b> of a psychoeducational assessment.  | Yes: | No: |
| 4. I have been informed of the <b>mutual responsibilities</b> I have with the school in relation to this assessment.                                       | Yes: | No: |
| 5. I have been informed of <b>the alternatives to assessment and the consequences of non-action.</b>   | Yes: | No: |
| 6. I have been informed of my right to be told about any changes to the assessment and my <b>ongoing right to refuse or rescind consent</b> in the future. | Yes: | No: |
| 7. I have been informed of the <b>time limits</b> to my consent for this assessment.   | Yes: | No: |
| 8. I have been informed of <b>the limits to confidentiality</b> to protect my child's privacy in connection with this assessment and its report.           | Yes: | No: |
| 9. I have been informed of possible <b>multiple uses</b> of the assessment information by school personnel.  | Yes: | No: |
| 10. I have had an opportunity to ask and have answered any questions or concerns I have about this assessment and about my <b>informed consent.</b>        | Yes: | No: |

I have voluntarily checked all the boxes above as "Yes", and I feel comfortable giving my consent for the school psychologist to conduct a psychoeducational assessment of my child.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent or Guardian)

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For more information about psychoeducational assessments or about any aspect of this consent form, please do not hesitate to contact the school psychologist.