VIDEO USE CONSENT FORM

As part of our knowledge exchange session on Client Feedback to be held on the 24th November 2011, we have made a video recording of you while you participated in our survey (aka Vox Pox). We would like you to indicate what uses of this video you are willing to consent to by initialling below. Your response will in no way affect your credit for participating. We will only use the video in ways that you agree to. **In any use of this video, your name would not be identified**. If you do not initial any of the spaces below, the video will be destroyed.

 The video can be viewed by professionals at the Knowhow session on Client Feedback. Please initial:
• The video can be used for learning purposes on what is 'feedback'. Please initial:
• The video can be used on our website www.cfecfw.asn.au Please initial:
FOR QUESTIONS ABOUT THE STUDY If you have any questions, concerns or complaints about this survey (Vox Pox), its procedures, risks and benefits you can contact: Judith Newbold, Manager Learning and Development Unit on 03 9094 3500
CONSENT I have read the above description and give my consent for the use of the video as indicated above.
Signature of Participant (over 18 years old) Date
Signature of Legally Authorised Representative Date (Parent, Guardian or Conservator under 18 years old)
Please send a copy of this consent form for me to keep.
Email:
Address: