

## Observation Consent Form

We carry out observations of our tutors and mentors to make sure your Non-Medical Helper support is of a high standard, as required by the DSA-QAG (Disabled Students' Allowance – Quality Assurance Group).

Observations also help your tutor or mentor develop their professional practice and skills.

|  | <b>Yes</b>               | <b>No</b>                |
|--|--------------------------|--------------------------|
| I give permission to Falmouth Exeter Plus for my session with my tutor/mentor (delete as applicable) to be observed by<br><hr/><br>_____ (insert name and role). | <input type="checkbox"/> | <input type="checkbox"/> |
| I give permission to Falmouth Exeter Plus for my session with my tutor/mentor (delete as applicable) to be filmed*.  | <input type="checkbox"/> | <input type="checkbox"/> |
| I understand that I can withdraw my consent at any time by emailing <a href="mailto:dyslexia@fxplus.ac.uk">dyslexia@fxplus.ac.uk</a> .                           | <input type="checkbox"/> | <input type="checkbox"/> |

\* All video recordings of sessions will be deleted after viewing by the observer.

Signed .....

Print name .....

Date .....