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Classroom Relationships and Social Attitudes

OPT-OUT FORM

Ethics Approval Reference: R52944/RE001

If you **DO NOT** want your child to participate in the above-named research study please fill out the form below and return it to your child's class teacher by 22/09/2017.

If we do not receive an opt-out form from you by this date, your child may be invited to take part in this study, as described in the accompanying information sheet.

I, the undersigned, hereby **DO NOT** give permission for my child to take part in the study titled *Classroom Relationships and Social Attitudes*.

Name of child: _____

Name of parent/guardian: _____

Signature: _____ Date: _____