

**SleepSmart follow-up session**

Thank you so much for taking part in the SleepSmart study. This is a follow-up session which will involve completing two language activities with your child. These activities will assess vocabulary knowledge, and are the same as the ones we administered with your child during the SleepSmart screening session. The aim of this follow-up is to see if the sleep measures we took during the SleepSmart study relate to changes in vocabulary knowledge a year later.

*Please tick the boxes to indicate whether you agree with the following statements*

No

Yes

1. I have read and understood the above information. I have had the opportunity

to ask questions and have had any queries answered satisfactorily.

1. I understand that my child’s participation is voluntary and I am free to withdraw

my child at any time, without giving any reason.

1. I give permission for my child to take part in this study.
2. I know that information obtained will be strictly confidential and anonymised.
3. I am happy to be contacted about future research studies.

Please be aware that all data is from a one-off research study rather than an in depth clinical assessment, and therefore cannot be used for diagnostic purposes.

Name of Child.............................................................Date of Birth................................................

Name of Parent/Guardian………………………………………Relationship to child ………………………………….

Email:.…………………………………………………………………………………………............................................

Address: ………………………………………………………………………………………...........................................

Telephone Number: ………………………………………………………………………………………........................

Signature of Parent/Guardian……………………………………………...........Date.....................................