**Informed Consent**

The Internet offers a world of wonderful new learning opportunities for children. Your guidance and involvement are essential to help ensure that children have a safe and rewarding online experience. Your efforts to ensure responsible online practices will help your children use only appropriate sites and will go a long way toward ensuring that your children have enriching experiences online.

Reading Eggs is a reading log type Web 2.0 tool that allows teachers to set up a classroom and track the progress of all their students. By using the Reading Eggs website, you agree to the Terms of Use and the Privacy Policy.

You child will be using Reading Eggs to:

* Go through reading lessons
* Play word / reading based games
* Access listening activities
* Work on spelling
* Access eBooks for reading comprehension
* Track their reading progress / awards

It will be used to help your child with many English skills and learning outcomes, especially reading. There are some guidelines that need to be agreed to in order to have informed consent and be registered as a user:

1. Use of Reading Eggs should be for the intended purposes of your teacher. If your child is not using the Tool in the proper way, or the teacher is concerned about your child’s progress, he or she will contact the child and the parent / guardian.
2. Keep your password private.
3. If you believe your child’s account has been compromised or hacked, you will report it to the teacher immediately.

Please keep page one for your records and complete page 2 to be sent back to me for my records. Thank you.

**Teacher Name**

**Contact Information**

Please choose one of the following, if you feel that you do not have enough information to make an informed decision, please contact me to discuss further:

[  ] My child agrees to the rules for using Reading Eggs

[  ] I do not agree to the use of Reading Eggs and I am aware it may result in a course withdrawal or a separate assignment(s).

We understand the privacy risks and management strategies as they have been shared with us.

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Parent Signature                                                                                  Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                          \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature                                                                                Date

Received by teacher on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_