



EMERGENT: Evaluating embers digitally supporting children's mental health

Child Assent Form

| Participant ID: |
|---------------------------------|
| Researcher Name: |
| Researcher Signature: |
| Child's name: |
| Date: |
| |
| |
| |
| Emergent Study Contact Details: |
| emergent@lsbu.ac.uk |
| |

Do you have any questions?

Tell us what they are.



Has someone talked to you about the study?



Do you agree to take part?



Do you know that you can stop at any time?



Child assent form for interviews IRAS Project Number: 331410 Version 2.0