



Intimate Care Permission Form

I, _____ give permission for my child _____
(Parent's name) (Child's name)

to receive intimate care at school by a member of school staff.

Intimate care may include but is not limited to: dressing, assistance with personal hygiene and toileting.

I have received a copy of the school's intimate care policy.

I understand that staff will endeavour to encourage my child to be independent.

I understand that I will be informed discretely should the occasion arise.

I wish, the following to be taken into consideration by staff when administering intimate care to my child: _____

Parent signature

Date