

**Section 20 Consent Form**

***Please note one of these forms must be signed by each person with parental responsibility.***

**Parent or PR holder’s details:**

**Name(s):**

**Date(s) of birth:**

**Address:**

**Consent:**

The meaning of “Section 20 consent” has been explained to me. In signing this document, I confirm that I give permission for the voluntary placement of the child. This consent means, but is not limited to, the following:

1. I understand that a voluntary placement is not the same as the Northamptonshire Children’s Trust starting legal proceedings, and I am aware that I do not have to give my permission.
2. I understand that I can change my mind about this agreement at any time and request the return of my child, as soon as is possible upon making such a request.
3. I understand that the Northamptonshire Children’s Trust does not share Parental Responsibility for the child with me or any other PR holder under this agreement.
4. I understand that I must separately give my consent for the child to undergo any medical examination or treatment, if required.
5. I understand that by placing the child in a placement without the Northamptonshire Children’s Trust issuing proceedings that the child will not be represented through his/her own solicitor.
6. I understand that I am entitled to obtain legal advice and it has been recommended that I do so by Northamptonshire’s Children’s Trust on .............…....... [date] by ……............................................ [Name of social worker].
7. A list of local solicitors has been provided on ...............…......[date] by …….......................………………………. [name of Social Worker] to the parent/ PR holder.

This consent form has been provided to me in my first language of (if this is not English please attach the relevant translated document).

**Information about placement supplied:**

I understand that Northamptonshire Children’s Trust, seek to place my child in voluntary accommodation and the following has been explained to me:

* The meaning of voluntary consent (as broadly defined below)
* Where the child will be placed
* What the arrangements will be for contact
* What the arrangement will be for meeting the child’s health needs; AND
* What is the agreed level of communication between the parents and social care team
* What the arrangements will be for Education, to include transport

**I have read this document and agree to its terms**

**Signed:** ....................................................................................................................................

**Name:**

**Date:**

**Relationship to child:**

|  |
| --- |
| **I/we agree to** **...................................................... (child’s name) being accommodated by Northamptonshire Children’s Trust****Signature:** ......................................... **Name: Date**  |
| **Review date agreed:**  |

**(REVIEW DATE: WITHIN 72 HOURS REVIEW; THEN RECONSIDER ISSUING/ “PR”)**