

In-Person Tutoring Permission Form

I,	, parent/guardian of
	permit my child to be tutored in-person
at the following location(s):	
Location 1 (provide full address):	
This location is a (please circle one):	Home / School Premises / Public Library / Other
Location 2 (provide full address):	
This location is a (please circle one):	Home / School Premises / Public Library / Other
Are there any noteworthy risks/hazards/em that the tutor needs to be aware of? Eg anim	nergency procedures in any of the above locations nals, construction etc.
Please state which location(s) and describe	below:

1-on-1 with the tutor with no additional adults within range of hearing? YES / NO

Will any in-person tutoring sessions occur in any of the above locations where your child will be

If NO, skip to "Other Things to Note" below.



If YES:

before being destroyed.
whereby it is only accessible by Future Tutor managers and will be kept for 30 days
recordings will be automatically sent to Future Tutor management's secure cloud server
tutors to AUDIO RECORD the entirety of the tutoring session using Google Meet. These
Future Tutor's Child Safety and Risk Management Policies, Future Tutor instructs its
In these circumstances (in-person tutoring where no other adults are present), as part of
In which location(s) will this occur?

These audio recordings, as per policy, will **only** be reviewed by Future Tutor management if any of the following occur:

- i) It has been less than 30 days since the recording was made, and;
- ii) There is an allegation or suspicion of child safety breaches levied against the Tutor, or;
- iii) There is an allegation of other misconduct or illegal behaviours levied against the Tutor, or;
- iv) There is an official complaint made by a client regarding the quality of tutoring delivered by the Tutor, or;
- v) The Tutor requests an official review for the purpose of ensuring their own safety due to alleged misconduct by the client.

Please circle:

I DO / DO NOT permit my tutor to audio record every in-person tutoring session with my child where no other adults are present.

Other Things to Note:

If in-person tutoring is to occur in my home, I have explained to the tutor which area in the home is to be used for tutoring and a bathroom they may use if necessary. I have explained to the tutor any relevant emergency procedures.



If in-person tutoring with no additional adult supervision has been permitted (above), I believe that my child is capable of being unsupervised in the home safely. I have ensured that the student understands and can perform any relevant emergency procedures.

I have alerted my tutor and Future Tutor of my child's medical conditions and the procedure for addressing any medical episodes my child may have, and the location of relevant medicines/epipens/asthma puffers etc.

I understand that Future Tutor takes child safety extremely seriously and does everything in its power to ensure that no child is endangered whilst in the care of its tutors. I understand that every tutor maintains a valid Working With Children Check, follows a strict Code of Conduct, and undergoes regular safety training.

Signed:		
Parent/Guardian's Name:		
Student's Name:	_	
Date:		