**Youth Entrepreneurship Agents Parent/ Guardian/ Carer consent form**

Dear Parent or Guardian,

You son/daughter has applied to become a Youth Entrepreneurship Agent for Big Ideas Wales and before they are accepted, we would like your consent for their involvement

Big Ideas Wales deliver the youth entrepreneurship services across Wales on behalf of Welsh Government. Inspiring the next generation of entrepreneurs in Wales, we encourage young people under 25 to develop entrepreneurial skills through experiences supported and informed by entrepreneurs. The work of Big Ideas Wales aims to:

* Increase entrepreneurship awareness and aspirations among young people
* Develop entrepreneurial skills and attitudes through practical experiences
* Provide clear progression route towards business start up

The position of Youth Entrepreneurship Agent is a voluntary role. ~~running from November 2020 – March 2021~~. As part of the work of Big Ideas Wales we are seeking involvement of young people across Wales to represent the youth voice - sharing their views, ideas and suggestions to help support progression of young people in Wales who have an aspiration to start their own business.

The key aspects of involvement in this role are:

* Attendance x 4 virtual events in March 2021 to represent the views of aspiring young entrepreneurs across Wales informing and influencing decisions of the future. (We anticipate this will require a maximum of x 12 hours of their time)
* Opportunity to access exclusive masterclasses delivered by leading experts and entrepreneurs to support their personal development and growth as an entrepreneurial leader of the future.

After collecting all the information, Big Ideas Wales will embark towards creating report with set of recommendations to help to tackle some of the barriers Youth Entrepreneurship Agents have raised facing young people who have an aspiration to be their own boss. In order for you son/daughter to participate I would be grateful if you could please complete and return this form for the attention of Penny Matthews and sending to enquires@bigideaswales.com

**Parents/ Guardian/ Carers permission**

I give permission for my son or daughter to take part as a Youth Entrepreneurship Agent, including all the activities involved. I have ascertained what activities are involved and this permission extends to all activities involved.

|  |  |
| --- | --- |
| Your name  |  |
| Relationship to the young person |  |
| Address and postcode (if different from the young person’s) |  |
| Mobile phone number |  |

If there is an emergency and we are not able to contact you, please give the details of someone else we can contact and sign below.

|  |  |
| --- | --- |
| Name |  |
| Relationship to the young person |  |
| Mobile phone number |  |

**Your name printed:**

**Your signature of consent:**