



# ADELOIS CONSULTING

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## PARENT/GUARDIAN CONSENT FORM

Dear Parent/Guardian,

Your child has indicated their interest to participate in the STEMUp Mentoring Program, a structured mentorship initiative designed to provide guidance, skill development, and career insights in STEM fields. This program includes virtual mentoring sessions, interactive STEM activities, and career-building support.

### Participant Information

- Mentee's Name: \_\_\_\_\_
- Age: \_\_\_\_\_
- Parent/Guardian Name: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email: \_\_\_\_\_

### Consent & Acknowledgment

I, \_\_\_\_\_, give my consent for my child, \_\_\_\_\_, to participate in the STEMUp Mentoring Program under the following terms:

- **Program Participation:** I understand that my child will engage in mentoring sessions, activities, and discussions related to STEM education and career development.
- **Virtual & In-Person Engagement:** I acknowledge that the program may include virtual meetings and, where applicable, in-person STEM activities.
- **Program Fee:** I understand that participation requires a program fee of \$100, which covers mentoring resources, expert-led sessions, and program materials.
- **Communication & Privacy:** I consent to my child communicating with their assigned mentor under the program's supervision and guidelines. I understand that Adelois Consulting ensures a safe and structured mentoring environment.
- **Media Release (Optional):** I  Grant /  Do Not Grant permission for my child's photos, testimonials, or project work to be used for promotional or educational purposes by Adelois Consulting.

### Parent/Guardian Signature

By signing below, I confirm that I have read and understood the terms of my child's participation in the STEMUp Mentoring Program and grant permission for them to take part.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Sincerely,

*Adelois Consulting*