Sharp Brain EEG Brain & Focus Assessment, Mind Ur Mind: Parent Consent

I, the parent/guardian named below, agree that my child may take part in the Sharp Brain EEG Brain & Focus Assessment at school.

I understand that:

- It is an educational assessment of focus, memory and reading, not a medical test or diagnosis.
- A soft, non-invasive EEG headband is worn for about 8 minutes. It only reads signals and is cleaned between students.
- My child's report will be shared with me on WhatsApp. The school will see only class-level results without my child's name, unless I tick the box below.
- The data will be used only to prepare my child's report and measure progress, and will not be shared with anyone else.
- My child can stop at any time, and I can ask for the data to be deleted by writing to info@mindurmind.org.in.

☐ I also allow the school to see my child's individual report.

☐ I allow an anonymous photo/video of the session for Mind Ur Mind's educational material (optional).

Student name _____

Class & section _____

Age _____

Parent/guardian name _____

WhatsApp number _____

Signature _____

Date _____