**Headspace Ballarat Youth Suicide Prevention Project Co-design Focus Groups**

Dear Parent/Guardian,

We request your support for an important opportunity for students to participate in the headspace Ballarat Youth Suicide Prevention Project Co-design Focus Groups. This project aims to involve young people in shaping strategies and resources to address youth suicide prevention in our community.

We believe that your child's input and perspective are invaluable to this project, as they will contribute to the development of initiatives that directly address the challenges faced by young people today. Participation in these focus groups will provide your child with a platform to share their thoughts, opinions, and experiences in a safe and supportive environment.

To confirm your child's involvement in this important project, we kindly request your consent for them to participate in the headspace Ballarat Youth Suicide Prevention Project Co-design Focus Groups. Please complete the following sections:

* I give permission for my child to participate in the headspace Ballarat Youth Suicide Prevention Project Co-design Focus Groups.
* I understand that the focus groups will involve discussions on sensitive topics related to mental health and suicide prevention. A rundown of the survey questions can be found [here](https://form.jotform.com/232138764403858) or by **following the QR code below.**
* I acknowledge that trained facilitators will be present throughout the focus groups to ensure a safe and supportive environment for all participants.
* I understand that the information shared during the focus groups will remain confidential and will be used solely for the purpose of the headspace Ballarat Youth Suicide Prevention Project.

If you are happy to allow your young person to engage in in this project please sign and return this from and if you have any questions or concerns regarding this project or your child's participation, please do not hesitate to contact us.

**Childs Name……………………………………………………………………Date of Birth…………..……………………………….**

**Parents Name………………………………………………………………..Signature………………………………………………….**

Thank you for your support in empowering young people to have a voice in addressing important issues that affect their well-being. Your child's participation will contribute to creating a safer and more supportive community for all.

Yours sincerely,

**Felicity Francis and Jesse Park**

headspace Youth Suicide Prevention Program