**ELSA/Pupil confidentiality agreement**

**Pupil Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ELSA Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

We will be having a series of sessions over the next few weeks. I am here to help and support you with… \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Our working relationship**

**What I expect from you:**

* You always try your best.
* You turn up on time or come straight away when asked.
* You treat me with respect.

**What you can expect from me:**

* I will respect you, your views and feelings.
* I will always listen to you.
* I will help and support you to the best of my ability.
* I will try and make our sessions fun and enable you to learn something new.
* I will share all the wonderful things you have done with your parents/carers/teachers with your agreement.

**Confidentiality**

**What I expect from you:**

* You can choose to talk about our sessions with others outside of the room.
* In a small group you can only talk about what you have done or learned in the sessions. It is not your responsibility to discuss other pupil’s experiences.

**What you can expect from me:**

What is said between you and me is confidential. I will not tell anyone else about what you have said to me **unless** I am worried that:

* You might hurt yourself
* You might hurt someone else
* You are in any danger physically or emotionally
* You tell me of anything that is unlawful

I will then speak to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and we will try and work out the best way of helping or protecting you.

We will both sign this form to show that we both understand what is expected in our sessions.

Your signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_