



Collection notice for enrolment

Purpose of collection

We, the Department of Education Western Australia (WA), collect your child's information to manage student enrolments in public schools. The information supports your child's school and contributes to an Australian education system which is fair for all students. This is done under the *School Education Act 1999* and the *School Education Regulations 2000*.

Note: In this document, 'parent' and 'you' include a child's parent or carer, the adult responsible for a child's day to day care, or a person enrolling on their own behalf.

Information collected for enrolment

When you enrol your child in a public school, you'll need to provide the following personal details and documents:

Child information

- Full name, date of birth, and gender
- Residential address and family living arrangements
- Whether the child identifies as Aboriginal or Torres Strait Islander
- Language background and languages spoken at home
- Current immunisation status
- Previous schools attended and educational history
- Learning, behavioural or other personal needs
- Health and medical conditions (including Form 1: Student health care summary)
- Australian citizenship or visa details

Parent information

- Name and relationship to your child
- Residential address and contact details
- Languages spoken at home
- Level of education, qualifications and occupation

Additional information

- Name and contact details of people the school can contact in an emergency
- Court or care orders or parenting plans, if applicable

Why this information is collected for enrolment

Your information is used to:

- assess and manage enrolment applications
- confirm student identity
- communicate with students and families
- support student learning, health and wellbeing, behaviour and safety
- enable students to take part in state, national and international assessments and reporting, including the
 - NAPLAN in Years 3, 5, 7 and 9
 - Pre-primary Australian Early Development Census (AEDC)
 - secondary Online Literacy and Numeracy Assessment (OLNA)
 - Nationally Consistent Collection of Data (NCCD) on school students with disability
 - any other mandated assessments and reporting
- manage student identifiers like the WA Student Number (WASN) and SmartRider cards
- inform educational policy, planning, strategy, and research
- provide support, services, programs and funding to meet your child's needs.

If we do not collect this personal information, it may put a student at risk and make it harder to provide the right education plans and support. It may also mean we cannot meet our legal responsibilities.

How we use and share enrolment information

We only use and share your child's enrolment information for the purpose it is collected and when the law allows or requires it.

We may share your child's enrolment information with:

- another WA public school when your child changes schools, such as when:
 - your child transfers from Year 6 to Year 7
 - they participate in a school-arranged alternative education program
- their new non-government school or interstate school, if you provide permission
- government agencies for health, welfare and/or legal compliance, and child protection laws.

The personal information we collect is stored locally, within Australia, in our Student Information System and follows our Information and Communication Technologies policies.

Personal information is collected, managed, and disposed of following our Records Management policy and the *State Records Act 2000*.

Your rights – access and correcting enrolment information

You can contact your child's school if you:

- want to see or update the enrolment information you provided
- have concerns about how your child's enrolment information is being used or stored.

Updates to personal information provided throughout a student's schooling are considered part of a student enrolment record.

More information

To learn more about how we protect your information, visit our website's page about [Privacy](#).



STUDENT ENROLMENT FORM

The Student Enrolment Form should be completed if you wish to accept an offer of a place at our school. The student's enrolment is complete once this form is submitted to the school with the necessary documentation.

Family details should include the details of the parent/carer residing at the same address as the student. Details relating to parents or other carers not residing with the student may be included in other contact details. You will also need to complete a Student Health Care Summary. Please complete the forms in English. Please contact the school if you require assistance with translation. To understand why the school collects personal information at enrolment, how it will be used, and when it may be shared, please see the Collection notice for enrolment at the end of the form.

SCHOOL NAME

School name **Year Level entering**

STUDENT DETAILS

Student surname

Legal surname (if different)

Previous Surname (if applicable)

1st Name **2nd Name** **3rd Name**

Preferred Name

Date of birth (dd/mm/yy) / / **Gender** Male Female Not Specified

Residential Address

Telephone (Home) **Postcode**

Car Registration (if applicable)

STUDENT DETAILS (Continued)

Is the student of Aboriginal or Torres Strait Islander origin?

- No Yes, Aboriginal Yes, Torres Strait Islander (TSI) Yes, both Aboriginal and TSI

Does the student speak a language other than English at home?

- No, English only Yes, Aboriginal English Yes, other language - please specify

(If more than one language, including an Aboriginal language, indicate the one that is spoken most often)

What was the first language spoken at home?

Does the student mainly speak English at home? YES NO

EVIDENCE OF IMMUNISATION STATUS

The student's Australian Immunisation Register (AIR) Immunisation History Statement shows the immunisation status is:

- Up to date Not up to date The student has an Immunisation Certificate issued by the Chief Health Officer

Religion (Optional)

SIBLING DETAILS

FullName/sofsiblingsattendingthis school

Student lives with:

Both Parents

Parent/Carer 1

Name

Relationship to student

Parent/Carer 2

Name

Relationship to student

Other, please specify

Name

Relationship to student

Student is:

Adult Student

Name

Independent minor

Name

Student lives with:

RESIDENCY STATUS

Nationality (optional)

Country of Birth

Is the student an Australian citizen?

- YES NO

If No, Is the student a permanent resident of Australia? YES NO **If Yes, Visa Sub Class Number**

Is the student a temporary resident of Australia?

- YES NO

If born overseas, Date of Arrival in Australia

Visa Sub Class Number

Visa Expiry Date
(if applicable)

PREVIOUS SCHOOL

Previous School

If previously enrolled in Home Education, specify the Education Region

DISABILITY

Does the student have a disability?

YES NO

If Yes, please specify

Please tick if you can provide documentation

YES NO

This will assist the Principal in planning to provide the best educational program for your child.

Autism

Physical Disability

Deaf or Hard of Hearing

Severe Mental Disorder

Global Developmental Delay (prior to age 6)

Specific Speech and/or Language Impairment

Intellectual Disability

Vision Impairment

Other, please specify

CONFIDENTIAL INFORMATION

Is this student subject to any court orders in respect of their care, welfare and development or access restrictions?

YES NO

If Yes, please specify and attach supporting documentation.

Is this student in the care of Director General of the Department of Communities - Child Protection and Family Support (CPFS)?

YES NO If Yes, please specify the name of the CPFS Case Manager, their CPFS District and their contact phone number.

Name

Contact Number

District

Does the student receive any of the following allowances? (Check the boxes that apply)

Secondary Assistance Youth Allowance Assistance for Isolated Children (AIC) Abstudy

PARENT / CARER 1 DETAILS

| | | | |
|---------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|----------------------|----------------------|
| Title | <input type="text"/> | First Name | <input type="text"/> |
| Surname | <input type="text"/> | | |
| Relationship to the student | <input type="text"/> | | |
| Gender | <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Not specified | | |
| Postal Address (if different from student residential address) | <input type="text"/> | | |
| | <input type="text"/> | Postcode | <input type="text"/> |
| Telephone | <input type="text"/> | Mobile Number | <input type="text"/> |
| Email Address | <input type="text"/> | | |

All parents across Australia, no matter which school their child attends, are asked to provide information about their background. Providing this information is voluntary but your information will help the Department of Education ensure that all students are being well served by our public schools.

Does Parent/Carer 1 speak a language other than English at home?

NO, English only YES, other - please specify

(If more than one language, indicate the one that is spoken most often)

What is the highest year of school Parent/Carer 1 has completed?

Year 12 or equivalent Year 11 or equivalent
 Year 10 or equivalent Year 9 or equivalent or below

(If you did not attend school, mark 'Year 9 or equivalent or below')

What is the level of the highest qualification Parent/Carer 1 has completed?

Bachelor degree or above Advanced diploma/Diploma
 Certificate I to IV (including trade certificate) No non-school qualification

What is the occupation group for Parent/Carer 1?

(Refer to Attachment 'Parent Occupation Groupings' for more information regarding the categories)

- 1.Senior Management in large business organisation, government administration & defence, and qualified professionals
- 2.Other business managers, arts/media/sportspersons & associate professionals
- 3.Tradesmen/women, clerks and skilled office, sales & service staff
- 4.Machine operators, hospitality staff, assistants, labourers and related workers
- 8.Unemployed, Retired, Student

(If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. If you have not been in paid work in the last 12 month, enter '8'.)

PARENT / CARER 2 DETAILS

| | | | |
|---------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|----------------------|----------------------|
| Title | <input type="text"/> | First Name | <input type="text"/> |
| Surname | <input type="text"/> | | |
| Relationship to the student | <input type="text"/> | | |
| Gender | <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Not specified | | |
| Postal Address (if different from student residential address) | <input type="text"/> | | |
| | <input type="text"/> | Postcode | <input type="text"/> |
| Telephone | <input type="text"/> | Mobile Number | <input type="text"/> |
| Email Address | <input type="text"/> | | |

All parents across Australia, no matter which school their child attends, are asked to provide information about their background. Providing this information is voluntary but your information will help the Department of Education ensure that all students are being well served by our public schools.

Does Parent/Carer 2 speak a language other than English at home?

NO, English only YES, other - please specify

(If more than one language, indicate the one that is spoken most often)

What is the highest year of school Parent/Carer 2 has completed?

Year 12 or equivalent Year 11 or equivalent
 Year 10 or equivalent Year 9 or equivalent or below

(If you did not attend school, mark 'Year 9 or equivalent or below')

What is the level of the highest qualification Parent/Carer 2 has completed?

Bachelor degree or above Advanced diploma/Diploma
 Certificate I to IV (including trade certificate) No non-school qualification

What is the occupation group for Parent/Carer 2?

(Refer to Attachment 'Parent Occupation Groupings' for more information regarding the categories)

- 1.Senior Management in large business organisation, government administration & defence, and qualified professionals
- 2.Other business managers, arts/media/sportspersons & associate professionals
- 3.Tradesmen/women, clerks and skilled office, sales & service staff
- 4.Machine operators, hospitality staff, assistants, labourers and related workers
- 8.Unemployed, Retired, Student

(If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. If you have not been in paid work in the last 12 month, enter '8'.)

OTHER FAMILY DETAILS

If applicable, please talk to your school about:

- arrangements for the payment of contributions or charges;
- distribution of information, including student reports and newsletters

OTHER CONTACT DETAILS

(Peoplewhomaybecontactedinanemergencyotherthan Parent/Carer 1 and Parent/Carer 2.)

CONTACT 1:

| | | | |
|---------------------------------------------------------------------------|----------------------|----------------------|----------------------|
| Title | <input type="text"/> | First Name | <input type="text"/> |
| Surname | <input type="text"/> | | |
| Relationship to the student | <input type="text"/> | | |
| Postal Address (if different from student residential address) | <input type="text"/> | | |
| | <input type="text"/> | Postcode | <input type="text"/> |
| Telephone (Home) | <input type="text"/> | Mobile Number | <input type="text"/> |
| Email Address | <input type="text"/> | | |

CONTACT 2:

| | | | |
|---------------------------------------------------------------------------|----------------------|----------------------|----------------------|
| Title | <input type="text"/> | First Name | <input type="text"/> |
| Surname | <input type="text"/> | | |
| Relationship to the student | <input type="text"/> | | |
| Postal Address (if different from student residential address) | <input type="text"/> | | |
| | <input type="text"/> | Postcode | <input type="text"/> |
| Telephone (Home) | <input type="text"/> | Mobile Number | <input type="text"/> |
| Email Address | <input type="text"/> | | |

PRIVACY AND DECLARATION

Please tick to confirm:

I understand:

- that the student's enrolment information is confidential and will be kept as required by the Department of Education's record keeping procedures.
- that information on the Enrolment Form will be used to meet the Department of Education's reporting requirements to other Government departments or agencies. This includes providing the Department of Health with my child's immunisation status as requested.

I declare:

- This is the only enrolment I have made for the student.
- I understand that I am required to notify the school as soon as any of the enrolment details for the student change.
- I understand that if I provide false or misleading information the student's enrolment may be reconsidered or cancelled.
- I have provided all documentation available to me.

Name of person enrolling student

Title **First Name**

Surname

Relationship to the student

Signature **Date** / /

(Independent minors and those aged 18 years or older may sign on their own behalf)

- If you are completing this form online and are unable to sign this form please check this box to confirm the above information is true and correct.

Note: In the event that statements made in this application later prove to be false or misleading, this application may be declined. Information supplied may need to be checked by the school.

APPROVAL OF PRINCIPAL OR DELEGATE

Principal's approval Enrolment finalised YES NO

Signature **Date** / /

OFFICE USE ONLY

Student's official documentation all sighted

Date

/ /

YES NO

Birth certificate

Passport

Visa Document/s

Other, please specify

Year/Form/Class

House Faction

Student's Residency status Australian citizen

Permanent resident

Temporary resident

Overseas Fee Paying student

YES NO

Entry Date

/ /

Previous School

LOTE Stage

Records received

YES NO

Contributions/Charges Billing

PG1 (%)

PG2 (%)

Other (%)

School records

(including reports, to be sent to)

PG1

PG2

Other

AIR Immunisation History Statement provided

YES NO

Date of issue

/ /

Immunisation status is

Up to date

Not up to date

Date AIR sighted

/ /

Immunisation Certificate issued by the Chief Health Officer

YES NO

Kindergarten eligibility for immunisation exemption:

Code

Enrolment approved by Principal

YES

Date

/ /

NO

Entered on school information system by

Date

/ /

Student leaves school (Date)

/ /

Advice of Transfer

/ /

Destination

(Date)

Records requested from transferring school YES NO

Date

/ /

PARENT OCCUPATION GROUPS

Attachment 1

RelatestoquestionsinParent/Carer1andParent/Carer 2 sections in this form

| GROUP 1 | GROUP 2 | GROUP 3 | GROUP 4 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Senior management in large business organisation government administration & defence, and qualified professionals | Other business managers, arts/media/sports persons and associate professionals | Tradesmen/women, clerks and skilled office, sales and service staff | Machine operators, hospitality staff, assistants, labourers and related workers |
| <p>Senior executive/ manager / department head in industry, commerce, media or other large organisation.</p> <p>Public service manager (section head or above), regional director, health/ education/police/ fire services administrator.</p> <p>Other administrator [school Principal, faculty head/dean, library/museum/gallery director, research facility director].</p> <p>Defence Forces Commissioned Officer.</p> <p>Professionals generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; identify, treat and advise on problems; and teach others.</p> <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing professional.</p> <p>Business [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer].</p> <p>Air/sea transport [aircraft/ships captain/officer/pilot, flight officer, flying instructor, air traffic controller].</p> | <p>Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business.</p> <p>Specialist manager [finance/ engineering/production/ personnel/ industrial relations/ sales/marketing].</p> <p>Financial services manager [bank branch manager, finance/ investment/insurance broker, credit/loans officer].</p> <p>Retail sales/services manager [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency].</p> <p>Arts/media/sports [musician, actor, dancer, painter, potter, sculptor, journalist, author].</p> <p>or media presenter, photographer, designer, illustrator, proof reader, sportsman/ woman, coach, trainer, sports official].</p> <p>Associate professionals generally have diploma/technical qualifications and support managers and professionals.</p> <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing technician/associate professional.</p> <p>Business/administration [recruitment/employment/ industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager].</p> <p>Defence Forces senior Non-Commissioned Officer.</p> | <p>Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.</p> <p>Clerks [bookkeeper, bank/PO clerk, statistical/actuarial clerk, accounting/claims/audit clerk, payroll clerk, recording/registry/ filing clerk, betting clerk, stores/ inventory clerk, purchasing/order clerk, freight/transport/shipping clerk, bond clerk, customs agent/customer services clerk, admissions clerk].</p> <p>Skilled office, sales and service staff</p> <p>Office [secretary, personal assistant, desktop publishing operator, switchboard operator].</p> <p>Sales [company sales representative, auctioneer, insurance agent/ assessor/loss adjuster, market researcher].</p> <p>Service [aged/disabled/refugee/ child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/ supervisor].</p> | <p>Drivers, mobile plant, production/ processing machinery and other machinery operators</p> <p>Hospitality staff [hotel service supervisor, receptionist, waiter, bar attendant, kitchen hand, porter, housekeeper].</p> <p>Office assistants, sales assistants and other assistants</p> <p>Office [typist, word processing/ data entry/business machine operator, receptionist, office assistant].</p> <p>Sales [sales assistant, motor vehicle/caravan/parts salesperson, checkout operator, cashier, bus/train conductor, ticket seller, service station attendant, car rental desk staff, street vendor, telemarketer, shelf stacker].</p> <p>Assistant/aide [trades' assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant].</p> <p>Labourers and related workers</p> <p>Defence Forces ranks below senior NCO not included in other groups.</p> <p>Agriculture, horticulture, forestry, fishing, mining worker [farm overseer, shearer, wool/hide classer, farm hand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand].</p> <p>Other worker [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor].</p> |

These categories have been determined nationally and are designed as broad occupational groupings. All Australian states and territories use the same categories.



FORM 1 STUDENT HEALTH CARE SUMMARY

SECTION A

Year **Form** **Teacher**

Student's name

Date of birth (dd/mm/yy) / / **Gender** Male Female Not Specified

Address

Postcode

FAMILY CONTACT DETAILS

Name

Relationship to student

Address

Postcode

Telephone (Home) **Telephone (Work)**

Telephone (Mobile)

Name

Relationship to student

Address

Postcode

Telephone (Home) **Telephone (Work)**

Telephone (Mobile)

MEDICAL DETAILS

Medical practice

Doctor 1

Telephone

Doctor 2

Telephone

Do you have ambulance insurance? YES NO - If yes, specify insurance provider:

If there is a medical emergency, parents/carers are expected to meet the cost of an ambulance.

List any essential information that could affect your child in an emergency e.g. allergy to penicillin.

Medicare Card number

Medicare Card Individual Reference Number (IRN)

Expiry date (dd/mm/yy)

ADMINISTRATION OF MEDICATION

Written authorisation must be provided for staff to administer any form of medication at school.

Long term medication – Complete the Medication section of the relevant health care plan – see below.

Short term medication – Request an Administration of Medication form to complete and return to the Principal or class teacher.

Note: All medication required must be supplied by parents/carers.

INFORMED CONSENT

Your child's health care information will be shared with staff on a need to know basis unless otherwise stated.

Do you give permission for the school to share your child's health care information? YES NO

Note: If your child is enrolled in a TAFE, PEAC or an alternative education program, this includes the transfer of their health care information to the principal or manager of that program.

If no, and the information is to be restricted, who can be informed of your child's health care information?

Does your child have one or more health condition(s) that will require support from school staff? (Check the box that applies)

NO - Sign below and return Section A of this form to the school office. If your child's requirements change, please notify the school.

Signature

Date

If you are completing this form online and are unable to sign this form please check this box to confirm the above information is true and correct. Note: In the event that statements made in this application later prove to be false or misleading this application may be declined. Information supplied may need to be checked by the school.

YES - Complete the remainder of this form and return to the school office. You will be given additional forms to complete.

List your child's health condition(s)

SECTION B

IN THE FOLLOWING TABLE, PLEASE INDICATE YOUR CHILD'S CONDITION(S) WHICH REQUIRE THE SUPPORT OF SCHOOL STAFF.

(In response to the information below, you will be given further forms for specific health conditions to complete)

Health conditions (Check the box that applies)

- Severe Allergy/Anaphylaxis
- Minor and Moderate Allergies
- Diabetes
- Seizures
- Asthma
- Activities of Daily Living
- Other Conditions or Needs** (Please specify below)

Will school staff require specific training to support your child?

- YES NO
- YES NO
- YES NO
- YES NO
- YES NO
- YES NO
- YES NO

Has your child's Medical Practitioner provided a health care plan to assist the school to manage the condition?

- YES NO - If yes, advise the Principal:

If you have ticked Yes for specific staff training, please discuss the type of training needed with the Principal.

SECTION C - CONSENT FOR PHOTO IDENTIFICATION ON YOUR CHILD'S HEALTH CARE PLAN

If your child has a condition where an emergency may occur, please indicate whether you give consent for staff to place your child's medical details and photo on view to provide immediate identification.

I give permission for my child's medical details and photo to be on view for staff.

- YES NO

If yes, please attach photo to the relevant health care plan(s).

SECTION D - MEDIC ALERT INFORMATION

Does your child have a Medic Alert bracelet or pendant?

- YES NO - If yes, provide details below:

Parent/Carer Signature

Date

Parent/Carer Name

- If you are completing this form online and are unable to sign this form please check this box to confirm the above information is true and correct. Note: In the event that statements made in this application later prove to be false or misleading this application may be declined. Information supplied may need to be checked by the school.

ON COMPLETION OF THIS FORM, PLEASE REQUEST AND COMPLETE THE RELEVANT HEALTH CARE PLANS.

Note: Where appropriate students should be encouraged to participate in their health care planning.

OFFICE USE ONLY

Does the child have an allergy that needs to be flagged on SIS?

- YES NO

Date

Have relevant health care plans been issued to the parent?

- YES NO

Date

Has the Principal been informed if:

specific training is required to support the student?

- YES NO

the student's health care information is to be restricted?

- YES NO

Date Student Health Care Summary was completed and uploaded on SIS:

Date



SHIRE OVAL/SHIRE LIBRARY/SUPERVISED SWIM PERMISSION SLIP

As there is a need for the students to leave the school grounds to use the Shire Oval and Shire Library, we require permission from parents/guardians. We also need permission from parents/guardians in order for the children to have supervised swimming.

SHIRE OVAL

WHEN: Each day
TIME: During school time

SHIRE LIBRARY

WHEN: Every second Thursday
TIME: TBA at the beginning of each year

SWIMMING POOL

WHEN: Everyday throughout Terms 1 and 4
TIME: 12.30pm – 12.50pm, Swimming lessons and PE Friday 1.45—3.00pm

STAFF ATTENDING: (Two staff members will at all times be in attendance during swimming sessions). At least one staff member or adult will have a relevant qualification needed to supervise.

PARENT GUARDIAN CONSENT

I have read and understood the above information.

I give my consent for my child/ren to use the Shire Oval/ go to the Shire Library/participate in Supervised Swimming.

I am aware the Department of Education insurance does not cover personal accidents through misadventure or loss or damage of personal belongings.

Signed.....(Parent/Guardian) Date.....



ONLINE CONSENT FORM

Dear parent /caregiver

Our school now has access to the online services provided by the WA Department of Education. These increase the range of teaching tools available to staff and will enhance the opportunities available to students.

I am writing to you to seek approval for your child to be given access to these online services. This will involve the school using the student's full name, preferred name, class and year to create a unique online services account.

The Department's online services currently provide:

- individual email accounts for all students and staff - Webmail, the Department of Education's portal site and email provider.
- access to the internet, with all reasonable care taken by schools to monitor and control students' access to web sites while at school
- access to email services (webmail) from home if the home computer is connected to the Internet

If you agree to your son or daughter making use of these online services, please complete the permission slip attached to this letter. You will also need to ensure that your son or daughter reads or understands the acceptable usage agreement, also attached to this letter, before the permission slip is signed. Both signed documents should be returned to school so that you child/children can access and use the online services account that has been created for your child.

Please note that while every reasonable effort is made by schools and the Department to prevent student exposure to inappropriate online content when using the Department's Online Services, it is not possible to completely eliminate the risk of such exposure.

You should also be aware that general internet browsing that your child undertakes from home or from locations other than school is not monitored or filtered by the Department since it is not conducted via the Department's online services.

CONSENT FORM – APPROPRIATE USE OF INTERNET SERVICES BY STUDENTS

Our school provides access to online services provided by the Department of Education. These increase the range of teaching tools available to staff and enhance the learning opportunities available to students.

The Department's online services currently provide:

- individual email accounts for all students;
- access to the Internet, with all reasonable care taken by schools to monitor and control students' access to web sites while at school;
- access to the online teaching and learning services such as digital resources and online learning activities;
- access to online file storage and sharing services; and

If you agree to your child using these online services, please complete the permission slip and have your child sign the Acceptable Usage Agreement form. Please go through and explain all of the dot points in the Acceptable Usage Agreement to ensure that your child understands the content before the permission slip is signed. Both signed documents should be returned to school so that an online services account can be created for your child.

You should be aware that the Department has the right to review, audit, intercept, access and disclose messages created, received or sent over Department online services. Logs of email transactions and Internet access data are kept for administrative, legal and security purposes and may be monitored. Similar to other corporate records, emails and Internet access records are discoverable in the event of legal action and are subject to provisions of the [Freedom of Information Act 1992](#).

Parents / responsible persons

Do you give permission for your child to have an online services account Yes / No (circle one)

I agree to and understand the responsibilities my child has when using the online services provided at school for educational purposes, in accordance with the Acceptable Usage Agreement for school students. I also understand that if my child breaks any of the rules in the agreement that the principal may take disciplinary action in accordance with the Department's *Behaviour Management in Schools* policy.

Name of parent or responsible person: _____

Signature of parent or responsible person: _____

Date:

Note: while every reasonable effort is made by schools and the Department of Education to prevent student exposure to inappropriate online content when using the Department's Online Services, it is not possible to completely eliminate the risk of such exposure. The Department cannot filter Internet content accessed by your child from home or from other locations away from the school. The Department recommends the use of appropriate Internet filtering software.

ACCEPTABLE USAGE AGREEMENT FOR PRIMARY STUDENTS K-6

If you use the online services of the WA Department of Education you must agree to the following rules:

- I will use the school computer only with the permission of a teacher.
- I will follow all instructions from teachers when using school computers.
- I will not let anybody else know my password.
- I will not let others use my online services account unless it is with the teacher's permission.
- I will not access other people's online services accounts.
- I know that I am responsible for anything that happens when my online services account is used.
- I will tell my teacher if I think someone is using my online services account.
- I know that the school and the WA Department of Education may see anything I send or receive using the email service.
- I will make sure that any email that I send or any work that I wish to have published is polite, carefully written and well presented.
- I will use material from web sites only if I have permission to do so.
- If I use material in my work that I have found on the web services, I will say where it comes from.
- If I see any information on the computer that makes me feel uncomfortable I will tell my teacher straight away.
- I will not reveal personal information, including names, addresses, photographs and telephone numbers of myself or others
- I will not damage or disable the computers, computer systems or computer networks of the school, the WA Department of Education or any other organisation.

Please keep this agreement in a safe place so that you can look at it when you need to. Please write your name in the space provided.

X _____

STUDENT AGREEMENT

I agree to abide by the acceptable usage agreement for school students.

I understand that if I am given an online service account and break any of the rules in the agreement; it may result in disciplinary action, determined by the principal in accordance with the school's student welfare and discipline policies.

Name of student: _____

Signature of student: _____

Date: _____



PERMISSION TO PUBLISH STUDENTS' WORK OR IMAGES OF STUDENTS ON WEB SITES

Dear parent / caregivers,

I request your permission for video or still (photographic) images of your child to be taken during school activities. If such images are captured, they would be used for the purpose of educating students, promoting the school, or promoting public education. I am also seeking your permission for the school to publish images and/or samples of your child's work.

If you give your permission, the school may publish images of your child and/or samples of work done by your child in a variety of ways, including, but not limited to, online and hard copy school newsletters, Department of Education and Training Internet web sites or intranet web sites and local newspapers. If published, third parties would be able to view the photographs and work.

If you sign the attached form it means that you agree to the following:

1. The school is able to publish images of your child and samples of your child's work as many times as it requires in the ways mentioned above
2. Your child's image may be reproduced either in colour or in black and white.
3. The school will not use your child's image or samples of your child's work for any purpose other than for the education of students, or for the general promotion of public education and the school.
4. The school will only publish the first name of the student. Family names will not be revealed.

Any images captured by the school will be kept for no longer than is necessary for the above-mentioned purposes and will be stored and disposed of securely. Whilst every effort will be made to protect the identity of your child, the WA Department of Education cannot guarantee that your child will not be able to be identified from the image or work.

If you agree to permit the school to capture images of your child, and to publish images of your child, or samples of your child's work, in the manner detailed above, please complete the consent form and return it to the school ASAP. This consent, if signed, will remain effective until such time as you advise the school otherwise.

CONSENT FORM

I agree to the videoing or photographing of my child during school activities for use by the school in educating students and promoting the school and public education for 2023. I also agree to the publication of images or samples of work in ways including, but not limited to, school newsletters online and in hardcopy, web sites or intranet web sites of the WA Department of Education, school newsletters and the local newspaper, subject to the conditions set out above. I will notify the school if I decide to withdraw this consent.

Name of student: _____

Year Level: _____

Signature of parent/responsible person: _____

Date: _____