



MULLALOO BEACH PRIMARY SCHOOL
Independent Public School

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.

Older devices and some smart devices may need Adobe Reader to use this form. A free version of Adobe Reader is available to download via <https://get.adobe.com/reader/>.

SCHOOL NAME

School name

Mullaloo Beach Primary School

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



Other

Residential Address

Postcode

Telephone (Home)

Car Registration (if applicable)

Student's Religion
(if applicable)

Is the student to be withdrawn from religious instruction or activities?



YES



NO

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

SIBLING DETAILS

Full Name/s of siblings attending this school

Student lives with:

☐ Both Parents

☐ Parent/Carer 1

Name

Relationship to student

☐ Parent/Carer 2

Name

Relationship to student

☐ Independent minor

Name

Relationship to student

☐ Adult Student

Name

Relationship to student

☐ Other, please specify

Name

Relationship to student

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? ☐ NO ☐ YES - If Yes, Visa Sub Class Number

Is the student a temporary resident of Australia?

☐ YES ☐ NO

If Yes, 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 about (The school will request copies of this information)

☐ 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.

Does the family or student have a Health Care Card?

☐ YES ☐ NO

If Yes, please provide card number

Expiry Date

/ /

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

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

District

Name

Contact Number

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"/>		
Date of birth (dd/mm/yy)	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	Gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Other
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 months, 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"/>		
Date of birth (dd/mm/yy)	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Other
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 months, 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 (People other than Parent/Carer 1 and Parent/Carer 2 who may be contacted in an emergency.)

CONTACT 1:

Title	<input type="text"/>	First Name	<input type="text"/>
Surname	<input type="text"/>		
Relationship to the student	<input type="text"/>		
Postal Address <i>(if different from student residential address)</i>	<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 <i>(if different from student residential address)</i>	<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 approved

☐ YES ☐ NO

Signature

Date

FORM 1 – STUDENT HEALTH CARE SUMMARY

SECTION A: 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?

No ☐ - Sign below. If your child's requirements change, please notify the school.

Signature: Date:

Yes ☐ - Complete the remainder of this form. 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	Tick health condition	Will school staff require specific training to support your child?
Severe Allergy/Anaphylaxis	<input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Minor and Moderate Allergies	<input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Diabetes	<input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Seizures	<input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Asthma	<input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Activities of Daily Living	<input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Other Conditions or Needs (Please specify)		
•	<input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
•	<input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

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:

Parent/Carer Signature:

Date:

Parent/Care Name:

IF REQUIRED ON COMPLETION OF THIS FORM, RELEVANT HEALTH CARE PLANS FOR ANY EXISTING HEALTH CONDITIONS WILL BE PROVIDED TO YOU BY THE SCHOOL.

PLEASE COMPLETE AND RETURN THE FORM/S PRIOR TO THE STUDENT COMMENCING.

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: / /

PARENT OCCUPATION GROUPS

Attachment 1

Relates to questions in Parent/Carer 1 and Parent/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]. 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/refuge/ 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, kitchenhand, 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, farmhand, 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.

CONSENT FORM Attachment 2

At Mullaloo Beach Primary School, we aim to offer your child the widest range of learning opportunities and celebrate learning whenever possible. This may often require some form of parental consent. This form asks you to consent (or otherwise) to your child's participation / use / access to several aspects of the school program. At all times we make the very best efforts to exercise exemplary standards in respect of duty of care.

MEDIA CONSENT

Children's images and/or their work are often published to recognise excellence or effort and may appear in newspapers, on the internet, in newsletters or on film or video. Their names may also be included but no contact details are provided. Work/images captured by the school will be kept for no longer than is necessary for the purposes outlined above and will be stored and disposed of securely.

- ☐ Yes, I give consent to my child to have his/her image and/or work published as described above.
- ☐ No, I do not give consent. In addition, see Appendix F of the Student's online policy.

INTERNET ACCESS

Student access to the internet is provided in accordance with the school policy (available from the office or school website). Student access is contingent on abiding by the users' Code of Conduct.

- ☐ Yes, my child has permission to access the internet in accordance with school policy.
- ☐ No, I do not give consent. In addition, see the School's policy and the Student's online policy.

VIEWING CONSENT

Children often watch videos / DVDs / television documentaries as part of their learning. Almost always these are 'G' rated and don't require consent. Very occasionally something with a 'PG' rating is appropriate for which we would need parental permission.

- ☐ Yes, I consent to my child viewing items with a 'PG' rating if deemed suitable by the teacher and school administration.
- ☐ No, I do not give consent.

LOCAL EXCURSIONS

Children occasionally walk within the local area for minor excursions under the supervision of the teacher and attend activities in local parks, nature reserves, another school, city council library or shopping Centre. On all occasions, parents will be notified of the local excursion.

- ☐ Yes, I consent to my child participating in teacher supervised local excursions which may involve short walks to and from the school.
- ☐ No, I do not give consent.

P&C CONSENT

Consent to give contact name and email address to P&C for P&C updates.

- ☐ Yes, I give consent for contact name and email address to be given to the P&C.
- ☐ No, I do not give consent.

Permission for your child's name and room number to be provided to the P&C for P&C events.

- ☐ Yes, I give consent for my child's name to be provided to the P&C for P&C events.
- ☐ No, I do not give consent.

Name of student:

Year:

Name of person signing the consent form: First Name:

Surname:

Signature:

Please indicate relationship to the student (e.g., parent/guardian/responsible person):

APPENDIX F. PERMISSION TO PUBLISH STUDENTS’ IMAGES AND WORK FOR SCHOOL PURPOSES

Dear Parent and Caregiver,

Your permission is sought for the school to publish video or photographic images of your child and/or samples of your child’s schoolwork to be used by the school and the Department of Education. The purpose of using the images or work will be activities such as promoting the school, school events and student achievements.

Your child’s image and/or school work may be published for the above purposes in a range of formats such as hardcopy and digital, including audio and video file formats, and published to a range of media including but not limited to school newsletters, email, school and Department of Education intranet and internet sites including social media websites (e.g. Facebook, YouTube etc.), any third party applications and local newspapers in hardcopy and digital formats, which may enable viewers/readers to identify your child.

The school will endeavour to limit identifying information that accompanies images of your child or child’s work; however, there will be occasions when your child’s name, class and school may be published along with images.

If you agree to this use of your child’s image and schoolwork, please complete the consent below and return this whole permission form to the school. Once signed, the consent will remain effective until such time as you advise the school otherwise.

Principal
Mullaloo Beach Primary School

PERMISSION: (do not detach)

I agree to the videoing or photographing of my child and my child’s schoolwork during school activities for use by the school and the Department of Education in the ways stated above.

IMPORTANT: I understand that while the school and Department of Education will only publish my child’s information for the above-stated purposes, the internet is accessible by any person worldwide. I understand that my child’s information can be accessed, copied, and used by any other person using the internet (e.g., shared through social media such as Facebook, YouTube, etc.). I understand that once my child’s information has been published on the internet the school and Department of Education have no control over its subsequent use and disclosure. I understand that I can withdraw this permission at any time by contacting the school or Department in writing; however, this will not affect materials that have already been published and disseminated.

Name of student: Form / Class:

Signature of student: Date:

Signature of parent: Date:

ACCEPTABLE USAGE AGREEMENT FOR PRIMARY STUDENTS K - 6

Dear Parent and Guardian,

Our school now provides access to the online services provided by the Department of Education. These increase the range of teaching tools available to staff and will enhance the opportunities available to students. Online services provided to students in public schools will only be used for learning related activities and require informed parental consent and appropriate management.

Students need to be protected from exposure to inappropriate online materials or activities, to be aware of the risks associated with some online activities such as blogging and to adopt protective behaviour online.

Cyber smart activities from K-6 will be taught to students to educate them about safety online.

We require your 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 access their unique online services account.

The Department's online services currently provide:

- Individual email accounts for all students and staff
- 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 web conferencing, digital resources and online learning activities
- Access to online file storage and sharing services; and
- Access to Portal services 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 an online services account can be created for your child if required by your child's teacher.

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 by your child from home or locations other than school is **not** monitored or filtered by the Department since it is not conducted via the Department's network and that you are responsible for supervision of your child's use of the internet from home.

Yours sincerely,

Department of Education ICT Team

ONLINE SERVICES ACCEPTABLE USE AGREEMENT (K-YEAR 6)

ACCEPTABLE USAGE AGREEMENT FOR PRIMARY STUDENTS K - 2

On-Line Rules for students in K-2 *(Parents to discuss with their child/ren)*

I agree to follow the on-line rules set out below when I use the internet or our log-on account:

- I will ask the teacher first before using the school computer.
- I will not give my password out to others.
- I will not let other people log-on to my account without checking with the teacher first.
- I will tell the teacher if I think someone is using my log-on account.
- I will tell the teacher if I see anything that makes me feel uncomfortable.
- I will only use work from the internet if I have asked the teacher.
- If I download work or pictures from the internet I will say where it comes from.
- I will get the permission of my teacher before I print anything.
- I will not give out my name, phone number, address, name of the school, photographs or other details about myself or others without checking with the teacher first.
- I will take care when using computer equipment and will not change the computer settings.
- I will not use the school computers to be mean, rude or unkind about other people.

I understand that:

- If I use the internet or my log-on account in a way that I shouldn't, I may not be able to use these in the future.

ACCEPTABLE USAGE AGREEMENT FOR PRIMARY STUDENTS 3 - 6

On-line Rules for students in 3 - 6 *(Parents to discuss with their child/ren)*

If you use the online services of the 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 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 & well presented.
- I will use material from Internet sites or other sources only if I have permission to do so.
- If I use material in my work that I have found on the Internet, I will say where it comes from.
- I will get the permission of my teacher before I print anything.
- 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, credit card details and telephone numbers of myself or others.
- I will not damage or disable the computers, computer systems or computer networks of the school.
- I will not use the school computers to be mean, rude or unkind about other people.

I understand that:

- I will be held responsible for my actions while using online services and for any breaches caused by allowing any other person to use my online services account.
- The misuse of online services may result in the withdrawal of access to services and other consequences dictated in School's policy & I may be held legally liable for offences committed using these services.

ONLINE SERVICES ACCEPTABLE USE AGREEMENT (K-YEAR 6)

CONSENT FORM - ACCEPTABLE USAGE AGREEMENT FOR PRIMARY STUDENTS

- I give permission for my child to use online services for educational purposes.
- I agree to abide by the acceptable usage agreement for school students.
- I understand that if I am given online services account and break any of the rules in the agreement; it may result in disciplinary action, determined by the principal in accordance with the Department's Behaviour Management in Schools policy.

I understand that if I use the internet or my online account in a way that I should not, then I may not be able to use these in the future.

Name of student:

Class:

Year group:

Signature of parent:

Date:

PERMISSION FOR STUDENTS TO HAVE AN ONLINE SERVICES ACCOUNT

Parent

- ☐ I give permission for my child to have an online services account.
- ☐ I DO NOT give permission for my child to have an online services account.

I understand and agree that my child has responsibilities when using the online services provided at school for educational purposes, in accordance with the Acceptable Use 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 *Student Behaviour Policy and Procedures*.

Name of parent:

Signature of parent:

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 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 at home.

Office use only: Processed on: / / by (initials):

OFFICE USE ONLY

Student's official documentation all sighted (Date): ☐ YES ☐ NO

☐ Birth certificate ☐ Passport ☐ Visa /Travel document/s

☐ Other, please specify

Year/Form/Class

House Faction

**LOTE Stage Records received ☐ YES ☐ NO

Student's Residency status: ☐ Australian Citizen ☐ Permanent Resident ☐ Temporary resident

☐ Overseas Student: If yes, international fee paying: ☐ YES ☐ NO

Entry Date:

Previous School:

Transfer note sent: ☐ NO ☐ YES on (Date)

Records received from transferring school: ☐ NO ☐ YES on (Date):

Publications/Internet Permission Form completed: ... ☐ YES ☐ NO

Contributions and Charges Billing: ☐ PG1: % ☐ PG2: % ☐ Other: %

Official documentation: ☐ PG1: % ☐ PG2: % ☐ Other: %
(Including reports, to be sent to)

AIR Immunisation History Statement provided: ☐ YES ☐ NO Date of issue:

Date Sighted: Vaccination status is ☐ Up to date ☐ Not up to date

If not up to date, additional request/s for documentation on date/s:

Other Immunisation evidence provided: AIR Immunisation History Form ☐ YES ☐ NO Immunisation

Certificate issued by the Chief Health Officer ☐ YES ☐ NO

Kindergarten students only Eligibility for immunisation exemption approved: Code:

Form/Class:

House Faction:

Approved by Principal: ☐ NO

☐ YES on (Date):

Entered on School Information system by:

on Date:

Student leaves school: (Date)

Date Transfer Note Sent:

Destination:

Records received from transferring school: ☐ NO ☐ YES on (Date):