

Parent/Carer Consent 2022

During the time that your child is at Bligh Park Public School we will require your consent to ensure continued involvement in ongoing programs. We are required to update this consent each year, however if at any time you wish to change your mind about consent given, it will only require a letter from you indicating this.

You will need to complete one form for each of your children.

Program/procedure

**Consent
yes / no
(please tick)**

Sunsmart

The school has developed a sun smart policy which encourages students to take responsibility for their skin. In line with the sun smart policy, I give consent for my child to apply Cancer Council sunscreen lotion at appropriate times during the school day. I accept full responsibility for my child's participation in the sun smart policy.

Publishing consent

The school/department may publish information about your child for the purposes of sharing their experiences with other students, informing the school and broader community about school and student activities and recording student participation in note-worthy projects or community service.

The information may include your child's name, age, class and information collected at school such as photographs, sound and visual recordings of your child, your child's work and expressions of opinion such as in interactive media.

The school's communication systems in which your child's information may be published include but are not limited to:

- public websites of the department including the school website and the department's intranet.
- departmental publications including the school newsletter, annual school report, Skool Loop other similar communication app, promotional material published in print and electronically including on the department websites.

Parents/carers should be aware that when information is published on public websites and social media channels, it can be linked to by 3rd parties and may be discoverable online for a number of years, if not permanently. Search engines may also cache or retain copies of published information.

Photo consent

Students are photographed each year in their class group, also some extra-curricula groups e.g. band, dance, choir, student representative council, school events e.g. carnivals, assemblies and Year 6 graduation if applicable. These group photos are available to all members of the group and school community. These photos may include students' enrolled name. I give permission for my child to appear in class, SRC, dance, band, choir and other school event group photos applicable to my child.

Consent
yes / no
(please tick)

Acceptable use of digital technologies & virtual classroom policies

As the parent/carer of this student I have read the 'virtual classroom' and 'acceptable use of digital technologies' policies. I understand that access to digital technologies and the internet is designed for educational purposes. I further understand that if my child fails to abide by the outlined rules, their access to digital technologies and the internet at Bligh Park Public School will be cancelled for a specified period of time. I give permission for my child to have access to the internet and use digital technologies at Bligh Park Public School for educational purposes.

Agreement by student user: _____

please print student name

I have explained the rules of using digital technologies and accessing the internet/virtual classrooms at Bligh Park Public School to my child. They have agreed to follow these rules and understand that access to the internet and the use of digital technologies at Bligh Park Public School will be cancelled for a specified period of time if any of these rules are broken.

Medical conditions

It is most important that we have up to date information on your child's health so that adequate support can be put in place. Should your child be in a situation where direct and immediate action may be needed in case of emergencies, we would ask that you provide a recent (small) photograph of your child to assist easy identification by members of staff. Should any condition change or a new condition be diagnosed, please update the records.

Health concern e.g. asthma, allergy (please supply documentation if appropriate)

Condition: _____

Medication: _____ dosage: _____

Doctor/specialist name: _____

Doctor/specialist phone: _____

All students

Student's name: _____ class: _____ date: _____

Name: _____ signature: _____ date: _____
(parent/carer) (parent/carer)