



# Maleny State School

Connected Learners – Creative Leaders

## Enrolment and Consent Forms Package

This Enrolment and Consent Forms package contains the forms to complete as part of student enrolment at Maleny State School.

**Student Name:** \_\_\_\_\_

**DOB:** \_\_\_\_\_ **Year Level:** \_\_\_\_\_

Please use the checklist below to ensure completion of all required forms.

### Forms

- 1. Enrolment Agreement Form**
- 2. Application for Student Enrolment Form**
- 3. State School Consent Form – Media**
- 4. ICT Responsible Use Procedure and Agreement Form (P-6)**
- 5. Chaplain and School Photos Consent Form**

### Checklist

- 6. Enrolment Interview Documentation Checklist**

NB An **Online Services Student Consent Form** will be sent separately via QParents (online completion and automatic return) or via paper once enrolment commences.

**Please return all completed documents to the School Office.**



# Maleny State School

## Enrolment Agreement

This enrolment agreement sets out the responsibilities of the student, parents or carers and the school staff about the education of students enrolled at Maleny State School

**Responsibility of student to:**

- attend school on every school day for the educational program in which they are enrolled, on time, ready to learn and take part in school activities
- act at all times with respect and show tolerance towards other students and staff
- work hard and comply with requests or directions from the teacher and principal
- abide by school rules/expectations as outlined in the school's Responsible Behaviour Plan for Students, including not bringing items to school which could be considered as weapons (e.g. dangerous items such as knives)
- meet homework requirements and wear school's uniform (if applicable)
- respect the school property.

**Responsibility of parents to:**

- ensure your child attends school on every school day for the educational program in which they are enrolled
- advise the school as soon as possible if your child is unable to attend school and reason/s why (e.g. child is sick)
- attend open meetings for parents
- let the school know if there are any problems that may affect your child's ability to learn
- ensure your child completes homework regularly in keeping with the school's homework policy
- treat all school staff with respect
- support the authority of school staff thereby supporting their efforts to educate your child and assist your child to achieve maturity, self-discipline and self-control
- not allow your child to bring dangerous or inappropriate items to school
- abide by school's instructions regarding access to school grounds before, during and after school hours
- advise principal if your child is in out-of-home care
- keep school informed of any changes to your contact details or your child's details, such as home address, email address and phone number
- ensure the school is aware of any changes to your child's medical details.

**Responsibility of school staff to:**

- design and implement engaging and flexible learning experiences for individuals and groups of students
- inform parents and carers regularly about how their children are progressing
- design and implement intellectually challenging learning experiences which develop language, literacy and numeracy
- create and maintain safe and supportive learning environments
- support personal development and participation in society for students
- foster positive and productive relationships with families and the community
- inform students, parents and carers about what the teachers aim to teach the students each term
- teach effectively and to set high standards in work and behaviour
- clearly articulate the school's expectations regarding the Responsible Behaviour Plan for Students and the Student Dress Code policy
- ensure that parents and carers are aware that the school does not have personal accident insurance cover for students
- advise parents and carers of extra-curricular activities operating at the school in which their child may become involved (for example Program of Chaplaincy Services, sports programs)
- set, mark and monitor homework regularly in keeping with the school's homework policy



# Maleny State School

## Enrolment Agreement

- contact parents and carers as soon as possible if the school is concerned about the child's school work, behaviour, attendance or punctuality
- notify parents of an unexplained absence of their child as soon as practicable on the day of the student's absence (allowing time for parents to respond prior to the end of the school day)
- deal with complaints in an open, fair and transparent manner in accordance with departmental procedure, [Complaints management – State schools](#)
- treat students and parents with respect.

- Student Code of Conduct
- Student Dress Code
- Homework Policy
- School charges and voluntary contributions
- [Advice for state schools on acceptable use of ICT facilities and devices](#)
- Absences
- School excursions
- Complaints management
- [Religious instruction policy statement](#)
- [Chaplaincy and student welfare services policy statement](#)
- Department insurance arrangements and accident cover for students
- [Obtaining and managing student and individual consent](#)
- School instructions for school access

I acknowledge:

- That I have read and understood the responsibilities of the student, parents or carers and the school staff outlined above; and
- That information about the school's current rules, policies, programs and services, as outlined above has been provided and explained to me.

Student Signature: \_\_\_\_\_ Parent/Carer Signature: \_\_\_\_\_ On behalf of Maleny State School

The link to the School Newsletter is emailed to Parents each fortnight.

Please take the time to read the Newsletter.

It is our main means of communicating with our School Community.

# Application for student enrolment form

## INSTRUCTIONS

Please refer to the *Application to enrol in a Queensland state school* information sheet at the end of this form when completing this application. Completion and submission of this application form to the school does not confirm enrolment. The school will notify you of the outcome of your application as soon as practicable.

Failure or refusal to complete those sections of the form marked with an (\*) or to provide required documentation may result in a refusal to process your application. These questions and your consent are considered necessary to ensure the school can undertake its administrative and care responsibilities.

Sections of the form not marked (\*) are optional. However, failure to complete these sections may result in the school not being eligible for important Federal and State Government funding reliant on such information. Parents of all students in Australia have been asked to provide information on their family background as part of a national initiative towards providing an education system that is fair to all students, regardless of their background. The required information includes the Indigenous status and language background of the student, and the education, occupation and language background of the parents.

If you have any questions about the enrolment form or process, or require assistance completing this form, including translation services, please contact the school in the first instance.

## PRIVACY STATEMENT

The Department of Education (DoE) is collecting the information on this form for the purposes outlined in the *Education (General Provisions) Act 2006* (Qld) (EGPA 2006), and in particular for:

- i. assessing whether your application for enrolment should be approved
- ii. meeting reporting obligations required by law or under Federal – State Government funding arrangements
- iii. administering and planning for providing appropriate education, training and support services to students
- iv. assisting departmental staff to maintain the good order and management of schools, and to fulfil their duty of care to all students and staff
- v. communicating with students and parents.

This collection is authorised by ss. 155 and 428 of the EGPA 2006. DoE will disclose personal information from this form to the Queensland Curriculum and Assessment Authority when opening student accounts, in compliance with Part 3 of the *Education (Queensland Curriculum and Assessment Authority) Act 2014* (Qld).

Personal Information from this form will also be supplied to Centrelink in compliance with ss.194 and 195 of the *Social Security (Administration) Act 1999* (Cth). De-identified information concerning parents' school and non-school education, occupation group and main language other than English and students' country of birth, main language other than English, gender and Indigenous status, is supplied to the Australian Government Department of Education in compliance with Federal – State Government funding agreements.

Personal information collected on this form may also be disclosed to third parties where authorised or required by law. Your information will be stored securely. If you wish to access or correct any of the personal information on this form or discuss how it has been dealt with, please contact the school in the first instance. If you have a concern or complaint about the way your personal information has been collected, used, stored or disclosed, please also contact the school in the first instance.

## PROSPECTIVE STUDENT DEMOGRAPHIC DETAILS

|                                                                             |                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |     |
|-----------------------------------------------------------------------------|---------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| Legal family name*<br>(as per birth certificate)                            |                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |     |
| Legal given names*<br>(as per birth certificate)                            |                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |     |
| Preferred family name                                                       |                                                               | Preferred given names                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |     |
| Gender*                                                                     | <input type="checkbox"/> Male <input type="checkbox"/> Female | Date of birth*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | / / |
| Copy of birth certificate available to show school staff*                   | <input type="checkbox"/> Yes <input type="checkbox"/> No      | Enrolment may not be approved without enrolling staff sighting the prospective student's birth certificate. An alternative to birth certificate will be considered where it is not possible to obtain a birth certificate (e.g. prospective student born in country without birth registration system. Passport or visa documents will suffice). This does not include failure to register a birth or reluctance to order a birth certificate.<br>The requirement to sight the birth certificate does not apply where the prospective student has been previously enrolled in a state school and a birth certificate has been sighted.<br>For international students approved for enrolment by EQI, a passport or visa will be acceptable. |     |
| For prospective mature age students, proof of identity supplied and copied* | <input type="checkbox"/> Yes <input type="checkbox"/> No      | Prospective mature age students must provide photographic identification which proves their identity: <ul style="list-style-type: none"> <li>• current driver's licence; or</li> <li>• adult proof of age card; or</li> <li>• current passport.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |

**APPLICATION DETAILS**

|                                                                                                         |                                                          |                                                                                       |               |                    |
|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------------------------------------------------------------------|---------------|--------------------|
| Has the prospective student ever attended a Queensland state school?                                    | <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, provide name of school and approximate date of enrolment.                     |               |                    |
| What year level is the prospective student seeking to enrol in?                                         |                                                          | Please provide the appropriate year level.                                            |               |                    |
| Proposed start date                                                                                     | ____ / ____ / ____                                       | Please provide the proposed starting date for the prospective student at this school. |               |                    |
| Does the prospective student have a sibling attending this school or any other Queensland state school? | <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, provide name of sibling, year level, date of birth, and school                | Name:         |                    |
|                                                                                                         |                                                          |                                                                                       | Year Level    |                    |
|                                                                                                         |                                                          |                                                                                       | Date of birth | ____ / ____ / ____ |
|                                                                                                         |                                                          |                                                                                       | School        |                    |

**INDIGENOUS STATUS**

|                                                                            |                                                                                                                                                                                     |
|----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Is the prospective student of Aboriginal or Torres Strait Islander origin? | <input type="checkbox"/> No <input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Both Aboriginal and Torres Strait Islander |
|----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**FAMILY DETAILS**

| Parents/carers                                                                                                                                             | Parent/carer 1                                                                                                                                                                                                                                                                                                                                                    | Parent/carer 2                                                                                                                                                                                                                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Family name*                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                   |
| Given names*                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                   |
| Title                                                                                                                                                      | <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr                                                                                                                                                                                                                    | <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr                                                                                                                                                                                                                    |
| Gender                                                                                                                                                     | <input type="checkbox"/> Male <input type="checkbox"/> Female                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> Male <input type="checkbox"/> Female                                                                                                                                                                                                                                                                                                     |
| Relationship to prospective student*                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                   |
| Is the parent/carer an emergency contact?*                                                                                                                 | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                          |
| 1 <sup>st</sup> Phone contact number*                                                                                                                      | Work/home/mobile                                                                                                                                                                                                                                                                                                                                                  | Work/home/mobile                                                                                                                                                                                                                                                                                                                                                  |
| 2 <sup>nd</sup> Phone contact number*                                                                                                                      | Work/home/mobile                                                                                                                                                                                                                                                                                                                                                  | Work/home/mobile                                                                                                                                                                                                                                                                                                                                                  |
| 3 <sup>rd</sup> Phone contact number*                                                                                                                      | Work/home/mobile                                                                                                                                                                                                                                                                                                                                                  | Work/home/mobile                                                                                                                                                                                                                                                                                                                                                  |
| Email                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                   |
| Occupation                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                   |
| What is the occupation group of the parent/carer?                                                                                                          | <input type="checkbox"/> (Please select the parental occupation group from the list provided at the end of this form. If parent/carer 1 is not currently in paid work but has had a job in the last 12 months or has retired in the last 12 months, please use the last occupation. If parent/carer 1 has not been in paid work in the last 12 months, enter '8') | <input type="checkbox"/> (Please select the parental occupation group from the list provided at the end of this form. If parent/carer 2 is not currently in paid work but has had a job in the last 12 months or has retired in the last 12 months, please use the last occupation. If parent/carer 2 has not been in paid work in the last 12 months, enter '8') |
| Employer name                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                   |
| Country of birth                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                   |
| Does parent/carer 1 or parent/carer 2 speak a language other than English at home? (If more than one language, indicate the one that is spoken most often) | <input type="checkbox"/> No, English only<br><input type="checkbox"/> Yes, other – please specify<br><br>Needs interpreter? <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                              | <input type="checkbox"/> No, English only<br><input type="checkbox"/> Yes, other – please specify<br><br>Needs interpreter? <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                              |
| Is the parent/carer an Australian citizen?                                                                                                                 | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                          |
| Is the parent/carer a permanent resident of Australia?                                                                                                     | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                          |

**FAMILY DETAILS** (continued)

|                                                                                              |                                                                                                                                                              |          |  |                                                                                                                                                              |  |          |
|----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------|
| Parents/carers                                                                               | Parent/carer 1                                                                                                                                               |          |  | Parent/carer 2                                                                                                                                               |  |          |
| Address line 1                                                                               |                                                                                                                                                              |          |  |                                                                                                                                                              |  |          |
| Address line 2                                                                               |                                                                                                                                                              |          |  |                                                                                                                                                              |  |          |
| Suburb/town                                                                                  |                                                                                                                                                              |          |  |                                                                                                                                                              |  |          |
| State                                                                                        |                                                                                                                                                              | Postcode |  |                                                                                                                                                              |  | Postcode |
| <b>Mailing address (if it is the same as principal place of residence, write 'AS ABOVE')</b> |                                                                                                                                                              |          |  |                                                                                                                                                              |  |          |
| Address line 1                                                                               |                                                                                                                                                              |          |  |                                                                                                                                                              |  |          |
| Address line 2                                                                               |                                                                                                                                                              |          |  |                                                                                                                                                              |  |          |
| Suburb/town                                                                                  |                                                                                                                                                              |          |  |                                                                                                                                                              |  |          |
| State                                                                                        |                                                                                                                                                              | Postcode |  |                                                                                                                                                              |  | Postcode |
| Parent/carer school education                                                                | What is the <b>highest</b> year of schooling parent/carer 1 has completed? (For people who have never attended school, mark 'Year 9 or equivalent or below') |          |  | What is the <b>highest</b> year of schooling parent/carer 2 has completed? (For people who have never attended school, mark 'Year 9 or equivalent or below') |  |          |
| Year 9 or equivalent or below                                                                | <input type="checkbox"/>                                                                                                                                     |          |  | <input type="checkbox"/>                                                                                                                                     |  |          |
| Year 10 or equivalent                                                                        | <input type="checkbox"/>                                                                                                                                     |          |  | <input type="checkbox"/>                                                                                                                                     |  |          |
| Year 11 or equivalent                                                                        | <input type="checkbox"/>                                                                                                                                     |          |  | <input type="checkbox"/>                                                                                                                                     |  |          |
| Year 12 or equivalent                                                                        | <input type="checkbox"/>                                                                                                                                     |          |  | <input type="checkbox"/>                                                                                                                                     |  |          |
| Parent/carer non-school education                                                            | What is the level of the <b>highest</b> qualification parent/carer 1 has completed?                                                                          |          |  | What is the level of the <b>highest</b> qualification parent/carer 2 has completed?                                                                          |  |          |
| Certificate I to IV (including trade certificate)                                            | <input type="checkbox"/>                                                                                                                                     |          |  | <input type="checkbox"/>                                                                                                                                     |  |          |
| Advanced Diploma/Diploma                                                                     | <input type="checkbox"/>                                                                                                                                     |          |  | <input type="checkbox"/>                                                                                                                                     |  |          |
| Bachelor degree or above                                                                     | <input type="checkbox"/>                                                                                                                                     |          |  | <input type="checkbox"/>                                                                                                                                     |  |          |
| No non-school qualification                                                                  | <input type="checkbox"/>                                                                                                                                     |          |  | <input type="checkbox"/>                                                                                                                                     |  |          |

**COUNTRY OF BIRTH\***

|                                                    |                                                                                                                                            |
|----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| In which country was the prospective student born? | <input type="checkbox"/> Australia<br><input type="checkbox"/> Other (please specify country) _____                                        |
| Date of arrival in Australia ____ / ____ / ____    |                                                                                                                                            |
| Is the prospective student an Australian citizen?  | <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, evidence of the prospective student's immigration status to be completed) |

**PROSPECTIVE STUDENT LANGUAGE DETAILS**

|                                                                           |                                                                                                         |
|---------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| Does the prospective student speak a language other than English at home? | <input type="checkbox"/> No, English only<br><input type="checkbox"/> Yes, other – please specify _____ |
|---------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|

**EVIDENCE OF PROSPECTIVE STUDENT'S IMMIGRATION STATUS** (to be completed if this person is NOT an Australian citizen)\*

|                                                      |                                                                                                                                        |                                                |
|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Permanent resident          | Complete passport and visa details section below                                                                                       |                                                |
| <input type="checkbox"/> Student visa holder         | Date of arrival in Australia ____ / ____ / ____                                                                                        | Date enrolment approved to: ____ / ____ / ____ |
|                                                      | EQI receipt number:                                                                                                                    |                                                |
| <input type="checkbox"/> Temporary visa holder       | Complete passport and visa details section below. Temporary visa holders must obtain an 'Approval to enrol in a state school' from EQI |                                                |
| <input type="checkbox"/> Other, please specify _____ |                                                                                                                                        |                                                |

**EVIDENCE OF PROSPECTIVE STUDENT'S IMMIGRATION STATUS\* (continued)**

Passport and visa details (to be completed for a prospective student who is NOT an Australian citizen).

NOTE: A permanent resident will have a visa grant notification with an indefinite stay period indicated.

For prospective students arriving in Australia as refugee or humanitarian entrants, either PLO 56 Immigration issued card or 'Document to travel to Australia' with 'stay indefinite' recorded must be sighted by the school.

|                 |  |                                  |     |
|-----------------|--|----------------------------------|-----|
| Passport number |  | Passport expiry date             | / / |
| Visa number     |  | Visa expiry date (if applicable) | / / |
| Visa sub class  |  |                                  |     |

**PROSPECTIVE STUDENT'S PREVIOUS EDUCATION / ACTIVITY**

|                                                                                  |                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Where does the prospective student come from?                                    | <input type="checkbox"/> Queensland <input type="checkbox"/> interstate <input type="checkbox"/> overseas                                                                                                                                                                |
| Previous education/activity                                                      | <input type="checkbox"/> Kindergarten <input type="checkbox"/> School <input type="checkbox"/> VET <input type="checkbox"/> Home education <input type="checkbox"/> Full-time employment<br><input type="checkbox"/> Part-time employment <input type="checkbox"/> Other |
| Please provide name and address of education provider/activity provider/employer |                                                                                                                                                                                                                                                                          |

**RELIGIOUS INSTRUCTION\***

|                                                                                                                                                                                                                                                         |                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| From Year 1, the prospective student may participate in religious instruction if it is available.                                                                                                                                                       | Do you want the prospective student to participate in religious instruction? |
| If you tick 'No' or if the nominated religion is not represented within the school's religious instruction program, the prospective student will receive other instruction in a separate location during the period arranged for religious instruction. | <input type="checkbox"/> Yes <input type="checkbox"/> No                     |
| Parents/carers may change these arrangements at any time by notifying the principal in writing.                                                                                                                                                         | If 'Yes', please nominate the religion:                                      |
|                                                                                                                                                                                                                                                         |                                                                              |

**PROSPECTIVE STUDENT ADDRESS DETAILS\***

|                                                                                       |       |  |          |  |  |
|---------------------------------------------------------------------------------------|-------|--|----------|--|--|
| Principal place of residence address                                                  |       |  |          |  |  |
| Address line 1                                                                        |       |  |          |  |  |
| Address line 2                                                                        |       |  |          |  |  |
| Suburb/town                                                                           | State |  | Postcode |  |  |
| Mailing address (if it is the same as principal place of residence, write 'AS ABOVE') |       |  |          |  |  |
| Address line 1                                                                        |       |  |          |  |  |
| Address line 2                                                                        |       |  |          |  |  |
| Suburb/town                                                                           | State |  | Postcode |  |  |
| Email                                                                                 |       |  |          |  |  |

**EMERGENCY CONTACT DETAILS** (Other emergency contact details if parents/carers listed previously are not emergency contacts or cannot be contacted. At least one emergency contact must be provided)\*

|                                       | Emergency contact | Emergency contact |
|---------------------------------------|-------------------|-------------------|
| Name                                  |                   |                   |
| Relationship (e.g. aunt)              |                   |                   |
| 1 <sup>st</sup> phone contact number* | Work/home/mobile  | Work/home/mobile  |
| 2 <sup>nd</sup> phone contact number* | Work/home/mobile  | Work/home/mobile  |
| 3 <sup>rd</sup> phone contact number* | Work/home/mobile  | Work/home/mobile  |

## PROSPECTIVE STUDENT MEDICAL INFORMATION (including allergies)\*

### Privacy Statement

The Department of Education (DoE) is collecting this medical information in order to address the medical needs of students during school hours as well as during school excursions, school camps, sports and other school activities. DoE will not use this information to make a decision about a prospective student's eligibility for enrolment. The information will only be used by authorised employees of the department and DoE will only record, use and disclose the medical information in accordance with the confidentiality provisions at Section 426 of the Education (General Provisions) Act 2006.

It is essential that the school is advised before the prospective student's first day of attendance if the prospective student has any medical conditions. The school administration staff must also be informed of any new medical conditions or a change to medical conditions as soon as they are known.

Should the prospective student need to take routine medication during school hours, the *Parent consent to administer medication at school* form must be completed before school staff can administer medication. All medication must be provided in the original container with a pharmacy label providing clear instructions for administration. For emergency medication the school will also require a doctor's letter containing detailed instructions and or a signed Action Plan / Emergency Health Plan. Parent consent and health plans must be reviewed annually. All original documentation will be retained at the office and copies of Action or Emergency Health Plans kept with the student.

|                                                                                                                                                                                                                                                                                                                                                                                                                                   |                              |                                                                                          |                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|------------------------------------------------------------------------------------------|-----------------------------|
| No known medical conditions                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/>     |                                                                                          |                             |
| Medical condition (including allergies/sensitivities), symptoms and management (please refer to the list of medical condition categories provided)                                                                                                                                                                                                                                                                                |                              |                                                                                          |                             |
| Medical condition (including allergies/sensitivities), symptoms and management (please refer to the list of medical condition categories provided)                                                                                                                                                                                                                                                                                |                              |                                                                                          |                             |
| Medical condition (including allergies/sensitivities), symptoms and management (please refer to the list of medical condition categories provided)                                                                                                                                                                                                                                                                                |                              |                                                                                          |                             |
| Does the prospective student require any medical aids or devices (such as glasses, contact lenses, prosthetics or orthotics)? This is for the purpose of informing planning for school activities such as sport and school excursions.                                                                                                                                                                                            | <input type="checkbox"/> No  | <input type="checkbox"/> Yes, please specify                                             |                             |
| Name of prospective student's medical practitioner (optional)                                                                                                                                                                                                                                                                                                                                                                     |                              | Contact number of medical practitioner                                                   |                             |
| Medicare card number (optional)                                                                                                                                                                                                                                                                                                                                                                                                   |                              | Position Number                                                                          |                             |
| Cardholder name (if not in name of prospective student)                                                                                                                                                                                                                                                                                                                                                                           |                              |                                                                                          |                             |
| Private health insurance company name (if covered) (optional)                                                                                                                                                                                                                                                                                                                                                                     |                              | Private health insurance membership number (leave blank if company name is not provided) |                             |
| I authorise school staff to contact the prospective student's medical practitioner for the purposes of seeking advice in cases where an immediate but non-life threatening response is required (for instance, when the prospective student may be on an excursion or sporting event), and to provide Medicare card details if required? (answer only if medical practitioner and Medicare card details have been provided above) | <input type="checkbox"/> Yes |                                                                                          | <input type="checkbox"/> No |

## COURT ORDERS\*

### Out-of-Home Care Arrangements\*

Under the *Child Protection Act 1999*, when a Child Protection Order is approved by the Children's Court, the child is placed in out-of-home care (OOHC). Out-of-home care includes short or long term placement with an approved kinship or foster carer; in a supported independent living arrangement; in a safe house; and in residential care.

|                                                                                                                       |                              |                             |
|-----------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
| Is the prospective student identified as residing in out-of-home care?                                                | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If yes, what are the dates of the court order? Please provide a copy of the court order and/or the Authority to Care. | Commencement date            | / /                         |
|                                                                                                                       | End date                     | / /                         |
| Contact details of the Child Safety Officer (if known)                                                                | Name                         |                             |
|                                                                                                                       | Phone number                 |                             |

**COURT ORDERS\* (continued)****Family Court Orders\***

|                                                                                                                                                                   |                                                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Are there any current orders made pursuant to the <i>Family Law Act 1975</i> concerning the welfare, safety or parenting arrangements of the prospective student? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, what are the dates of the court order? Please provide a copy of the court order.                                                                          | Commencement date                                        |
|                                                                                                                                                                   | End date                                                 |

**Other Court Orders\***

|                                                                                                                                                                   |                                                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Are there any other current court orders, such as a domestic violence order, concerning the welfare, safety or parenting arrangements of the prospective student? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, what are the dates of the court order? Please provide a copy of the court order.                                                                          | Commencement date                                        |
|                                                                                                                                                                   | End date                                                 |

**APPLICATION TO ENROL\***

I hereby apply to enrol my child or myself at \_\_\_\_\_.

I understand that supplying false or incorrect information on this form may lead to the reversal of a decision to approve enrolment. I believe that the information I have supplied on this form is true and correct in every particular, to the best of my knowledge.

|           |                    |                    |                                                               |
|-----------|--------------------|--------------------|---------------------------------------------------------------|
|           | Parent/carer 1     | Parent/carer 2     | Prospective student (if student is mature age or independent) |
| Signature |                    |                    |                                                               |
| Date      | ____ / ____ / ____ | ____ / ____ / ____ | ____ / ____ / ____                                            |

**Office use only**

|                                                                                                                                               |                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                     |  |       |                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------|--|-------|-------------------------------------------------------------------------------------------------------|
| Enrolment decision                                                                                                                            |                                                          | Has the prospective student been accepted for enrolment? <input type="checkbox"/> Yes <input type="checkbox"/> No (applicant advised in writing)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                     |  |       |                                                                                                       |
|                                                                                                                                               |                                                          | If no, indicate reason:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                     |  |       |                                                                                                       |
|                                                                                                                                               |                                                          | <input type="checkbox"/> Does not meet School EMP or Enrolment Eligibility Plan requirements<br><input type="checkbox"/> Prospective student is mature age and school is not a mature age state school<br><input type="checkbox"/> Does not meet Prep age eligibility requirement<br><input type="checkbox"/> Prospective student is subject to suspension from a state school at the time of enrolment application<br><input type="checkbox"/> Does not meet requirements for enrolment in a state special school<br><input type="checkbox"/> Does not have an approved flexible arrangement with the school<br><input type="checkbox"/> School does not offer year level prospective student is seeking to be enrolled in<br><input type="checkbox"/> Prospective student has no remaining semester allocation of state education |  |                                                                                     |  |       |                                                                                                       |
| Date enrolment processed                                                                                                                      | ____ / ____ / ____                                       | Year level                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | Roll Class                                                                          |  | EQ ID |                                                                                                       |
| Independent student                                                                                                                           | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | Birth certificate/passport sighted, number recorded and DOB confirmed               |  |       | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Number: _____                             |
| Is the prospective student over 18 years of age at the time of enrolment? <input type="checkbox"/> Yes <input type="checkbox"/> No            |                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                     |  |       |                                                                                                       |
| If yes, is the prospective student exempt from the mature age student process? <input type="checkbox"/> Yes <input type="checkbox"/> No       |                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                     |  |       |                                                                                                       |
| If no, has the prospective mature age student consented to a criminal history check? <input type="checkbox"/> Yes <input type="checkbox"/> No |                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                     |  |       |                                                                                                       |
| School house/ team                                                                                                                            |                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | EAL/D support                                                                       |  |       | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> To be determined |
| FTE                                                                                                                                           |                                                          | Associated unit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | Visa and associated documents sighted                                               |  |       | <input type="checkbox"/> Yes <input type="checkbox"/> No                                              |
| EQI category                                                                                                                                  |                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | SV – student visa<br>TV – temporary visa<br>DS – dependent – parent on student visa |  |       | EX – exchange student<br>DE – distance education                                                      |

## Parental occupation groups for use with parent/carer details

### Group 1: Senior management in large business organisation, government administration and defence, and qualified professionals

**Senior executive/manager/department head** in industry, commerce, media or other large organisation.  
**Public service manager** [section head or above], regional director, health/education/police/fire services administrator  
**Other administrator** [school principal, faculty head/dean, library/museum/gallery director, research facility director]  
**Defence Forces** commissioned officer  
**Professionals** generally have degrees 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  
**Health, education, law, social welfare, engineering, science, computing** professional  
**Business** [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]  
**Air/sea transport** [aircraft/ship's captain/officer/pilot, flight officer, flying instructor, air traffic controller].

### Group 2: Other business managers, arts/media/sportspeople and associate professionals

**Owner/manager** of farm, construction, import/export, wholesale, manufacturing, transport, real estate business  
**Specialist manager** [finance/engineering/production/personnel/industrial relations/sales/marketing]  
**Financial services manager** [bank branch manager, finance/investment/insurance broker, credit/loans officer]  
**Retail sales/services manager** [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency]  
**Arts/media/sports** [musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof-reader, sportsperson, coach, trainer, sports official]  
**Associate professionals** generally have diploma/technical qualifications and support managers and professionals  
**Health, education, law, social welfare, engineering, science, computing** technician/associate professional  
**Business/administration** [recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager]  
**Defence Forces** senior Non-Commissioned Officer.

### Group 3: Tradespeople, clerks and skilled office, sales and service staff

**Tradespeople** generally have completed a four year trade certificate, usually by apprenticeship. All tradespeople are included in this group  
**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]  
**Skilled office, sales and service staff:**  
**Office** [secretary, personal assistant, desktop publishing operator, switchboard operator]  
**Sales** [company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher]  
**Service** [aged/disabled/refugee/childcare worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor].

### Group 4: Machine operators, hospitality staff, assistants, labourers and related workers

**Drivers, mobile plant, production/processing machinery and other machinery operators**  
**Hospitality staff** [hotel service supervisor, receptionist, waiter, bar attendant, kitchen hand, porter, housekeeper]  
**Office assistants, sales assistants and other assistants:**  
**Office** [typist, word processing/data entry/business machine operator, receptionist, office assistant]  
**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]  
**Assistant/aide** [trades' assistant, school/teacher aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant]  
**Labourers and related workers**  
**Defence Forces** ranks below senior NCO not included above  
**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]  
**Other worker** [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor].

### Group 8: Have not been in paid work in the last 12 months

## State schools standardised medical condition category list

|                                                                      |
|----------------------------------------------------------------------|
| Acquired brain injury                                                |
| Allergies/Sensitivities                                              |
| Anaphylaxis                                                          |
| Airway/lung/breathing - Oxygen required (continuously/periodically)  |
| Airway/lung/breathing - Suctioning                                   |
| Airway/lung/breathing - Tracheostomy                                 |
| Airway/lung/breathing - Other                                        |
| Artificial feeding - Gastrostomy device (tube or button)             |
| Artificial feeding - Nasogastric tube                                |
| Artificial feeding - Jejunostomy tube                                |
| Artificial feeding - Other                                           |
| Asthma                                                               |
| Asthma – student self-administers medication                         |
| Attention-deficit /Hyperactivity disorder (ADHD)                     |
| Autism Spectrum Disorder (ASD)                                       |
| Bladder and bowel - Urinary wetting, incontinence                    |
| Bladder and bowel - Faecal soiling, constipation, incontinence       |
| Bladder and bowel - Catheterisation (continuous, clean intermittent) |
| Bladder and bowel - Stoma site, urostomy, Mitrofanoff, MACE, Chair   |
| Bladder and bowel - Other                                            |
| Blood disorders - Haemophilia                                        |
| Blood disorders - Thalassaemia                                       |
| Blood disorders - Other                                              |
| Cancer/oncology                                                      |
| Coeliac disease                                                      |
| Cystic Fibrosis                                                      |
| Diabetes - type one                                                  |
| Diabetes - type two                                                  |
| Ear/hearing disorders - Otitis Media (middle ear infection)          |
| Ear/hearing disorders - Hearing loss                                 |
| Ear/hearing disorders - Other                                        |
| Epilepsy - Seizure                                                   |
| Eye/vision disorders                                                 |
| Endocrine disorder - Adrenal hypoplasia, pituitary, thyroid          |
| Heart/cardiac conditions - Heart valve disorders                     |
| Heart/cardiac conditions - Heart genetic malformations               |
| Heart/cardiac conditions - other                                     |
| Mental Health - Depression                                           |
| Mental Health - Anxiety                                              |
| Mental Health - Oppositional defiant disorder                        |
| Mental Health - Other                                                |
| Muscle/bone/musculoskeletal disorders - spasticity (Baclofen Pump)   |
| Muscle/bone/musculoskeletal disorders - Other                        |
| Skin Disorders - eczema                                              |
| Skin Disorders - psoriasis                                           |
| Swallowing/dysphagia - requiring modified foods                      |
| Swallowing/dysphagia - requiring artificial feeding                  |
| Transfer & positioning difficulties                                  |
| Travel/motion sickness                                               |
| Other                                                                |

# Application to enrol in a Queensland state school

This sheet contains information on how to complete the Application for student enrolment form (SEF-1 Version 8).

## Entitlement to enrolment

Under the *Education (General Provisions) Act 2006 (Qld)* a state school must enrol a prospective student if they are entitled to enrolment. While not exhaustive, the following matters may affect a prospective student's entitlement to enrol in a state school:

- if the school has a School Enrolment Management Plan or an Enrolment Eligibility Plan (enrolment is subject to eligibility under the plan)
- the applicant is a prospective mature age student (the applicant can only apply for enrolment at a mature age state school and will be subject to a satisfactory criminal history check, or as a student in a program of distance education. All prospective mature age students must have a remaining allocation of state education.)
- the prospective student is not of correct age for enrolment (relates to Preparatory Year and Years 1 to 6)
- the prospective student has been excluded, or is subject to suspension from a state school at the time of the application
- the school principal reasonably believes that the prospective student presents an unacceptable risk to the safety or wellbeing of members of the school community (application is referred to the Director-General)
- the school is a state special school and the prospective student does not meet the criteria for enrolment in a special school
- the proposed enrolment requires approval as part of a flexible arrangement under s.183 of the *Education (General Provisions) Act 2006 (Qld)*, and the arrangement has not yet been approved
- the prospective student is not an Australian resident or citizen or the child of an Australian permanent resident or citizen (visa restrictions may apply, fees may be charged, in some cases legislation requires that the prospective student must obtain approval from the Chief Executive via Education Queensland International (EQI) to enrol)
- the school does not offer the year level that the prospective student should be enrolled in
- the prospective student has no remaining semester allocation of state education. Enrolment cannot proceed until additional semesters are applied for by the prospective student (or parent on their behalf) and granted.

## Prospective student

A prospective student is a person who has applied to enrol at a state school but who has not yet been accepted for enrolment.

## Parent's occupation and education

All parents across Australia, no matter which school their child attends, are asked to provide information about family background (answering this question is optional). The main purpose of collecting this information is to promote an education system which is fair for all Australian students regardless of their background.

## Court Orders

Any court orders concerning the prospective student's welfare, safety or parenting arrangements should be provided to the school, and the school should also be provided with any new or updated orders.

## Name on enrolment form

A prospective student should be enrolled under their legal name as per their birth certificate. There is provision to also record a preferred family and/or given name. The preferred name will be used on internal school documents such as class rolls. The legal name will appear on semester reports unless there is a specific request to use the preferred name only. This request can come from parents/carers or the student (if the student is independent/mature age).

## Gender

Information about gender is supplied to the Federal Government to comply with State funding agreements. The gender category with which a person identifies may not match the sex they were assigned at birth. There is no requirement for a student's gender recorded on this form to align with the sex shown on their birth certificate or passport.

## Religious Instruction

Religious instruction is a program approved and provided by a religious denomination or religious society. Other instruction relates to part of a subject area that has been covered within the curriculum and may include, but is not limited to, personal research and/or assignments, revision of class work, and wider reading. Information about religious instruction available at the school, and about other instruction, is provided by the school at the time of enrolment and on the school's website.



# Maleny State School

Connected Learners – Creative Leaders

19/08/2024

## Introduction to the State School Consent Form (attached) for Maleny State School

This letter is to inform you about how we will use your child's personal information and student materials. It outlines:

- what information we record
- how we will use student materials created during your child's enrolment.

Examples of personal information which may be used and disclosed (subject to consent) include part of a person's name, image/photograph, voice/video recording or year level.

Your child's student materials:

- are created by your child whether as an individual or part of a team
- may identify each person who contributed to the creation
- may represent Indigenous knowledge or culture.

### Purpose of the consent

It is the school's usual practice to take photographs or record images of students and occasionally to publish limited personal information and student materials for the purpose of celebrating student achievement and promoting the school and more broadly celebrating Queensland education.

To achieve this, the school may use newsletters, its website, traditional media, social media or other new media as listed in the 'Media Sources' section below.

The State School Consent Form may, at your discretion, provide consent for personal information and a licence for the student materials to be published online or in other public forums. It also allows your child's personal information and student materials to be presented in part or alongside other students' achievements.

The school needs to receive consent in writing before it uses or discloses your child's personal information or student materials in a public forum. The attached form is a record of the consent provided.

It should be noted that in some instances the school may be required by the *Education (General Provisions) Act 2006* (Qld) or by law to record, use or disclose the student's personal information or materials without consent (e.g. assessment of student materials does not require further consent).



## **Voluntary**

There will not be any negative repercussions for not completing the State School Consent Form or for giving limited consent. All students will continue to receive their education regardless of whether consent is given or not.

## **Consent may be limited or withdrawn**

Consent may be limited or withdrawn at any time by you.

If you wish to limit or withdraw consent please notify the school in writing (by email or letter). The school will confirm the receipt of your request via email if you provide an email address.

If in doubt, the school may treat a notice to limit consent as a comprehensive withdrawal of consent until the limit is clarified to the school's satisfaction.

Due to the nature of the internet and social media (which distributes and copies information), it may not be possible for all copies of information (including images of student materials) once published by consent, to be deleted or restricted from use.

The school may take down content that is under its direct control, however, published information and materials cannot be deleted and the school is under no obligation to communicate changes to consent with other entities/ third parties.

## **Media sources used**

Following is a list of online and social media websites and traditional media sources where the school may publish your child's personal information or student materials subject to your consent.

- School website: <https://www.malenyss.eq.edu.au>
- Facebook: <https://www.facebook.com/MalenyStateSchool/>
- YouTube: <https://www.youtube.com/@malenystateschool3200>
- Instagram: NA
- Twitter: NA
- LinkedIn: NA
- Other: Schoolzine Online Newsletter - <https://malenyss.schoolzineplus.com/>
- Local newspaper
- School newsletter
- Traditional and online media, printed materials, digital platforms' promotional materials, presentations and displays.

The State School Consent Form does not extend to P&C run social media accounts or activities, or external organisations.

## **Duration**

The consent applies for the period of enrolment or another period as stated in the State School Consent Form, or until you decide to limit or withdraw your consent.

During the school year there may be circumstances where the school or Department of Education may seek additional consent.

## **Who to contact**

To return a consent, express a limited consent or withdraw consent please contact Mr Adrian Greig, Experienced Senior Teacher, 0754998333 and [admin@malenyss.eq.edu.au](mailto:admin@malenyss.eq.edu.au).

Adrian Greig should be contacted if you have any questions regarding consent.

## State School Consent Form

### 1 IDENTIFY THE PERSON TO WHOM THE CONSENT RELATES

- Parent/carer to complete
- Mature/independent students may complete on their own behalf (if under 18 a witness is required).

(a) Full name of individual: .....

(b) Date of birth: .....

(c) Name of school: .....

(d) Name to be used in association with the person's personal information and materials\* (please select):

Full Name  First Name  No Name  Other Name .....

\* Please note, if no selection is made, only the Individual's first name will be used by the school. However, the school may choose not to use a student's name at its discretion.

\*\* For school photos Full Name will be used unless a limitation is given in Section 5 below.

### 2 PERSONAL INFORMATION AND MATERIALS COVERED BY THIS CONSENT FORM

(a) **Personal information** that may identify the person in section 1:

- ▶ Name (as indicated in section 1)
- ▶ Image/photograph
- ▶ School name
- ▶ Recording (voices and/or video)
- ▶ Year level

(b) **Materials** created by the person in section 1:

- ▶ Sound recording
- ▶ Artistic work
- ▶ Written work
- ▶ Video or image
- ▶ Software
- ▶ Music score
- ▶ Dramatic work

### 3 APPROVED PURPOSE

If consent is given in section 6 of the form:

- The personal information and materials (as detailed in section 2) may be recorded, used and/or disclosed (published) by the school, the Department of Education (DoE) and the Queensland Government for the following purposes:
  - Any activities engaged in during the ordinary course of the provision of education (including assessment), or other purposes associated with the operation and management of the school or DoE including to publicly celebrate success, advertising, public relations, marketing, promotional materials, presentations, competitions and displays.
  - Promoting the success of the person in section 1, including their academic, sporting or cultural achievements.
  - Any other activities identified in section 4(b) below.
- The personal information and materials (as detailed in section 2) may be disclosed (published) for the above purposes in the following:
  - the school's newsletter and/or website;
  - social media accounts, other internet sites, traditional media and other sources identified in the 'Media Sources' section of the explanatory letter (attached);
  - year books/annuals and school photographs;
  - promotional/advertising materials; and
  - presentations and displays.

### 4 TIMEFRAME FOR CONSENT

**School representative to complete.**

(a) Timeframe of consent: duration of enrolment.

(b) Further identified activities not listed in the form and letter for the above timeframe: NA

### 5 LIMITATION OF CONSENT

The Individual and/or parent wishes to limit consent in the following way:

## 6 CONSENT AND AGREEMENT

### ► CONSEENTER – I am (tick the applicable box):

- parent/carer of the identified person in section 1
- the identified person in section 1 (if a mature/independent student or employee including volunteers)
- recognised representative for the Indigenous knowledge or culture expressed by the materials

I have read the explanatory letter, or it has been read to me. I have had the opportunity to ask questions about it and any questions that I have asked have been answered to my satisfaction. By signing below, I consent to the school recording, using and/or disclosing (publishing) the personal information and materials identified in section 2 for the purposes detailed in section 3.

By signing below, I also agree that this State School Consent form is binding. For the benefit of having the materials (detailed in section 2) promoted as DoE may determine, I grant a licence for such materials for this purpose. I acknowledge I remain responsible to promptly notify the school of any third party intellectual property incorporated into the licensed materials. I accept that attribution of the identified person in section 1 as an author or performer of the licensed materials may not occur. I accept that the materials licensed may be blended with other materials and the licensed materials may not be reproduced in their entirety.

Print name of student .....

Print name of conserver.....

Signature or mark of conserver.....

Date .....

Signature or mark of student (if applicable).....

Date .....

### SPECIAL CIRCUMSTANCES

If the form is required to be read out (whether in English or in an alternative language or dialect) to a parent/carer or Individual student; or when the conserver is an independent student and under 18 the section below must be completed.

### ► WITNESS – for consent from an independent student or where the explanatory letter and State School Consent Form were read

I have witnessed the signature of an independent student, or the accurate reading of the explanatory letter and the State School Consent Form was completed in accordance with the instruction of the potential conserver. The individual has had the opportunity to ask questions. I confirm that the individual has given consent freely and I understand the person understood the implications.

Print name of witness .....

Signature of witness .....

Date .....

### ► Statement by the person taking consent – when it is read

I have accurately read out the explanatory letter and State School Consent Form to the potential conserver, and to the best of my ability made sure that the person understands that the following will be done:

1. the identified materials will be used in accordance with the State School Consent Form
2. reference to the identified person will be in the manner consented
3. in accordance with procedures DoE will cease using the identified materials from the date DoE receives a written withdrawal of consent.

I confirm that the person was given an opportunity to ask questions about the explanatory letter and State School Consent Form, and all the questions asked by the conserver have been answered correctly and to the best of my ability. I confirm that the individual has not been coerced into giving consent, and the consent has been given freely and voluntarily.

A copy of the explanatory letter has been provided to the conserver.

Print name and role of person taking the consent .....

Signature of person taking the consent .....

Date .....

### Privacy Notice

The Department of Education (DoE) is collecting your personal information on this form in order to obtain consent for the use and disclosure of the student's personal information. The information will be used and disclosed by authorised school employees for the purposes outlined on the form. Student personal information collected on this form may also be used or disclosed to third parties where authorised or required by law. This information will be stored securely. If you wish to access or correct any of the personal student information on this form or discuss how it has been dealt with, please contact your student's school in the first instance.





# Maleny State School

## Maleny State School - ICT responsible use procedure and agreement

The following document and agreement forms are for all students and is to be signed-off by parents upon enrolment. Students in Year 4, 5 & 6 will complete the student section annually to ensure that they are aware and understand the purpose for and responsible use of the school's information and communication technology (ICT) services (including internet/ email), facilities and devices. Parents will need to sign an agreement upon enrolment which will remain in effect for the duration of the student's enrolment. It will be updated should changes be required.

### *Purpose statement*

- Information and communication technology (ICT), including access to and use of the internet and email, are essential tools for schools in the provision of innovative educational programs.
- Schools are constantly exploring new and innovative ways to incorporate safe and secure ICT use into the educational program.
- School students, only with the approval of the principal, may be permitted limited use and connection of personally-owned mobile devices to the department's network, where this benefits the student's educational program.

### *Authorisation and controls*

The principal reserves the right to restrict student access to the school's ICT services, facilities and devices if access and usage requirements are not met or are breached. However restricted access will not disrupt the provision of the student's educational program. For example, a student with restricted school network access may be allocated a stand-alone computer to continue their educational program activities.

The Department of Education monitors access to and use of its network. For example, email and internet monitoring occurs to identify inappropriate use, protect system security and maintain system performance in determining compliance with state and departmental policy.

The department may conduct security audits and scans, and restrict or deny access to the department's network by any personal mobile device if there is any suspicion that the integrity of the network might be at risk.

### *Responsibilities for using the school's ICT facilities and devices*

- Students are expected to demonstrate safe, lawful and ethical behaviour when using the school's ICT network as outlined in the Student Code of Conduct.
- Students are to be aware of occupational health and safety issues when using computers and other learning devices.
- Parents/guardians are also responsible for ensuring students understand the school's ICT access and usage requirements, including the acceptable and unacceptable behaviour requirements.
- Parents/guardians are responsible for appropriate internet use by students outside the school environment when using a school-owned/ school-provided devices and services.
- The school will educate students regarding cyber bullying, safe internet and email practices, and health and safety regarding the physical use of ICT devices. Students have a responsibility to adopt these safe practices.
- Use of the school's ICT network is secured with a username and password. The password must be difficult enough so that it cannot be guessed by other users and is to be kept private by the student and not divulged to other individuals (e.g. a student should not share their username and password with fellow students).
- Students cannot use another student's or staff member's username or password to access the school network. This includes not browsing or accessing another person's files, home or local drive, email or accessing unauthorised network drives or systems. Additionally, students should not divulge personal information (e.g. name, parent's name, address, phone numbers), via the internet or email, to unknown entities or for reasons other than to fulfil the educational program requirements of the school.
- Students need to understand that copying software, information, graphics or other data files may violate copyright laws without warning and be subject to prosecution from enforcement agencies.

### *Responsibilities for using a personal mobile device on the department's network*

- At Maleny State School personal mobile devices are NOT to be used during school times for personal or educational reasons. School owned/ managed devices will be supplied to meet educational outcomes.

Personal devices may be used at home to access and engage in acceptable and appropriate ways with departmental services/ systems or school approved 3<sup>rd</sup> party educational websites/ services.

- Devices are to be stored, as per the current school-based guidelines in place. These guidelines may be adjusted to respond to Health Department or Government directions (e.g. COVID mitigation guidelines). Any changes will always be explained to students and the community in advance of the guidelines being enacted.
- Unacceptable use will lead to the personal mobile device being confiscated by school employees, with its collection/return to occur at the end of the school day where the mobile device is not required for further investigation.

### *Acceptable/appropriate use/behaviour by a student*

It is acceptable for students while at school to:

- use school owned/ managed devices and services for:
  1. assigned class work and assignments set by teachers
  2. developing appropriate literacy, communication and information skills
  3. authoring text, artwork, audio and visual material for publication on the intranet or internet for educational purposes as supervised and approved by the school
  4. conducting general research for school activities and projects
  5. communicating or collaborating with other students, teachers, their parents or experts in relation to schoolwork
  6. accessing online references such as dictionaries, encyclopaedias, etc.
  7. researching and learning through the department's eLearning environment
- be courteous, considerate and respectful of others when using a school device

### *Unacceptable/inappropriate use/behaviour by a student*

It is unacceptable for students while at school to:

- use a school owned/ managed device or service in an unlawful manner
- download, distribute or publish offensive messages or pictures
- use obscene, inflammatory, racist, discriminatory or derogatory language
- use language and/or threats of violence that may amount to bullying and/or harassment, or stalking
- insult, harass or attack others or use obscene or abusive language
- deliberately waste printing and internet resources
- damage computers, printers or network equipment
- commit plagiarism or violate copyright laws
- ignore teacher directions regarding the use of social media, online email and internet chat
- send chain letters or spam email (junk mail)
- share their own or others' personal information and/or images which could result in risk to themselves or another person's safety
- knowingly download viruses or any other programs capable of breaching the department's network security
- use in-device cameras inappropriately, such as taking photos of others without permission.
- invade someone's privacy by recording personal conversations or daily activities and/or the further distribution (e.g. forwarding, texting, uploading, Bluetooth use etc.) of such material

### *Agreement forms*

The next two pages contain the year 4-6 student and parent/ guardian forms for completion and return. Both student and parent sections must be completed, signed and returned to your child's class teacher before full network and device access can be granted. Children in Prep to Year 3 classes are exempt from signing the student form. In its place age appropriate lessons covering ICT responsible use of devices and services will take place.

### *Need more information*

If you have any further questions about these forms please contact the following staff member for assistance:

Mr Adrian Greig E: [ajgre2@eq.edu.au](mailto:ajgre2@eq.edu.au) or PH: 5499 8333



# Maleny State School

**Year 4, 5 & 6 students to complete, sign and return this form to your child's class teacher.**

## **Student:** (student to complete and sign this section)

I understand that the school's information and communication technology (ICT) services, facilities and devices provide me with access to a range of essential learning tools, including access to the internet. I understand that the internet can connect me to useful information around the world.

While I have access to the school's ICT services, facilities and devices: I will use it only for educational purposes; I will not undertake or look for anything that is illegal, dangerous or offensive; and I will not reveal my password or allow anyone else to use my school account.

Specifically in relation to internet usage, should any offensive information appear on my screen I will close the window and immediately inform my teacher quietly, or tell my parents/guardians if I am at home.

If I receive any inappropriate emails at school I will tell my teacher. If I receive any at home I will tell my parents/guardians.

When using email or the internet I will not:

- reveal names, home addresses or phone numbers – mine or that of any other person
- use the school's ICT service, facilities and devices (including the internet) to annoy or offend anyone else.

I understand that my online behaviours are capable of impacting on the good order and management of the school whether I am using the school's ICT services, facilities and devices inside or outside of school hours.

I understand that if the school decides I have broken the rules for using its ICT services, facilities and devices, appropriate action may be taken as per the school's Student Code of Conduct, which may include loss of access to the network (including the internet) for a period of time.

I have read and understood this procedure/policy/statement/guideline and the Student Code of Conduct.

I agree to abide by the above rules/the procedure/policy/statement/guideline.

\_\_\_\_\_  
(Student's name)

\_\_\_\_\_  
(Student's signature) \_\_\_\_\_ (Date)

**Parents/ Guardians to complete, sign and return this form to your child's class teacher. This form will last for the period of enrolment for the student listed.**

**Parent or Guardian:**

I understand that the school provides my child with access to the school's information and communication technology (ICT) services, facilities and devices (including the internet) for valuable learning experiences. In regards to internet access, I understand that this will give my child access to information from around the world; that the school cannot control what is available online; and that a small part of that information can be illegal, dangerous or offensive.

I accept that, while teachers will always exercise their duty of care, protection against exposure to harmful information should depend upon responsible use by my child. Additionally, I will ensure that my child understands and adheres to the school's appropriate behaviour requirements and will not engage in inappropriate use of the school's ICT services, facilities and devices. Furthermore I will advise the school if any inappropriate material is received by my child that may have come from the school or from other students.

I understand that the school is not responsible for safeguarding information stored by my child on a departmentally-owned student computer or mobile device.

I understand that the school may remotely access the departmentally-owned student computer or mobile device for management purposes.

I understand that the school does not accept liability for any loss or damage suffered to personal mobile devices as a result of using the department's services, facilities and devices. Further, no liability will be accepted by the school in the event of loss, theft or damage to any mobile device unless it can be established that the loss, theft or damage resulted from the school's/department's negligence.

I believe \_\_\_\_\_ (**name of student**) understands this responsibility, and I hereby give my permission for him/her to access and use the school's ICT services, facilities and devices (including the internet) under the school rules. I understand where inappropriate online behaviours negatively affect the good order and management of the school, the school may commence disciplinary actions in line with this user agreement or the Student Code of Conduct. This may include loss of access and usage of the school's ICT services, facilities and devices for some time.

I have read and understood this procedure/policy/statement/guideline and the Student Code of Conduct.

I agree to abide by the above rules / the procedure/policy/statement/guideline.

\_\_\_\_\_ (Parent/Guardian's name)

\_\_\_\_\_ (Parent/Guardian's signature) \_\_\_\_\_ (Date)

The Department of Education through its [Information privacy and right to information](#) procedure is collecting your personal information in accordance with the [Education \(General Provisions\) Act 2006 \(Qld\)](#) in order to ensure:

- appropriate usage of the school network
- appropriate usage of personal mobile devices within the school network.

The information will only be accessed by authorised school employees to ensure compliance with its [Information privacy and right to information](#) procedure. Personal information collected on this form may also be disclosed to third parties where authorised or required by law. Your information will be stored securely. If you wish to access or correct any of the personal information on this form or discuss how it has been dealt with, please contact your child's school. If you have a concern or complaint about the way your personal information has been collected, used, stored or disclosed, please also contact your child's school.



# Maleny State School

## CHAPLAIN

Maleny State School Chaplaincy Service has been in place at the school since October 2007. Whilst the Chaplain is able to model their own faith position, they must not promote any one faith, denomination or philosophy as being superior to another.

The Chaplaincy Service has two core functions, pastoral care and mentoring:

1. Pastoral Care – the Chaplain provides an additional dimension to the school's care, guidance and support role, with a focus on spiritual, religious and/or ethical needs.
2. Mentoring – the Chaplain acts as a role model for students and assists in developing supportive relationships with and among students.

**More specifically, the Chaplain's role is to:**

- Build positive relationship with and between students.
- Promote a sense of wellbeing and belonging.
- Encourage students to realise their potential.
- Help children to resolve friendship difficulties.
- Provide religious and ethical guidance when requested.
- Assist student to explore their spirituality when requested.
- Work closely with other staff to help provide a nurturing and supportive school environment.
- Assist students who are experiencing personal issues such as family breakdown, family illness, divorce, grief, loss etc...
- Facilitate groups and lunchtime activities.
- Perform public prayer at school functions.
- Provide follow-up with new students.
- Assists families who may be experiencing financial difficulties.

I give permission for my child to access the Chaplain if necessary.  Yes  No.

I understand that should ongoing Chaplaincy services or One-on-one meetings be required I will be required to complete a separate specific Consent Form.

.....  
Parent/Guardian Name

.....  
Signature

.....  
Date

## SCHOOL PHOTO

Each year a Private Photography Company visits the school and takes Class Photos and Individual Photos of Students. Parents are given the opportunity to purchase copies of these photos. Individual photos are also taken separately and uploaded onto Oneschool, the School Operational System, to be used for internal purposes (Student of the Week, Student identification etc).

I give permission for my child to be included in her/his Class Photo and have her/his name printed below the photo.  Yes  No.

I give permission for my child's Individual photo to be taken.  Yes  No.

.....  
Parent/Guardian Name

.....  
Signature

.....  
Date



# Maleny State School

Connected Learners – Creative Leaders

## Enrolment Interview Documentation Checklist

The following list of documents are required for your interview. If transferring from another state school in Queensland some documents will not be required.

- Birth Certificate\*** (if starting in Prep or from interstate, non-government/ private school)
- Medical Information** (Doctor or Medical Specialist reports on any medical conditions, including prescribed medications)
- Report Card** from previous school (if from interstate, non-government/ private school)
- NAPLAN results** from previous school (if from interstate, non-government/ private school)
- Any other reports/testing** from previous school or medical specialists (e.g. speech therapist, psychologist, occupational therapist, etc.) indicating support required for learning support, special education or behavioural support (if from interstate, non-government/ private school)

NB An **Online Services Student Consent Form** will be sent via QParents (online completion and automatic return) or via paper once enrolment commences.

**Please bring all relevant documents to your enrolment interview.**

\* Enrolment may not be approved without enrolling staff sighting the prospective student's birth certificate. An alternative to birth certificate will be considered where it is not possible to obtain a birth certificate (e.g. prospective student born in country without birth registration system. Passport or visa documents will suffice). This does not include failure to register a birth or reluctance to order a birth certificate. The requirement to sight the birth certificate does not apply where the prospective student has been previously enrolled in a state school and a birth certificate has been sighted. For international students approved for enrolment by EQI, a passport or visa will be acceptable.