



Year of enrolment: _____
Year level: _____

# Tuart Forest Primary School

Seek. Learn. Discover.

## STUDENT ENROLMENT FORM

*(For enrolment in a Western Australian Public School)*

**This form is to be completed for children whose application has been accepted by the school. It is intended for children not enrolled at the school in the previous year and for all Pre Primary students.** For students in the compulsory years of schooling who were enrolled in the previous year, please inform the school directly if there are changes needed to update the form.

Please read the accompanying *Parent information about Enrolment in a Western Australian public school* before lodging the Enrolment Form with the school.

*Note: If you are typing the information into this form, doubleclick the check box  and select the radio button under the heading Default value 'Checked' and click OK. e.g. .*

### STUDENT DETAILS

Surname: \_\_\_\_\_ Legal Surname (if different): \_\_\_\_\_

Previous Surname (if applicable): \_\_\_\_\_

1<sup>st</sup> Name: \_\_\_\_\_ 2<sup>nd</sup> Name: \_\_\_\_\_ 3<sup>rd</sup> Name: \_\_\_\_\_

Preferred 1<sup>st</sup> Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex:  Male  Female

Residential Address: \_\_\_\_\_

\_\_\_\_\_  
Postcode: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ Student's Mobile (if applicable): \_\_\_\_\_

Full Name/s of brothers and sisters attending this school:  
\_\_\_\_\_

#### Student lives with:

Both Parents .....	<input type="checkbox"/>	Other.....	<input type="checkbox"/>
Parent/Guardian/Carer 1 .....	<input type="checkbox"/>	<b>Name</b>	<b>Relationship to student</b>
Parent/Guardian/Carer 2 .....	<input type="checkbox"/>	_____	_____
Independent minor.....	<input type="checkbox"/>		

(Reg3. School Education Regulations 2000)

For information on access restriction, see *Confidential* section of this form.

#### Emergency Contacts (Indicate contacts in order of preference):

	Name	Phone No.	Mobile No.	Relationship to student
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

\_\_\_\_\_

**STUDENT DETAILS – ADDITIONAL INFORMATION**

Evidence of immunisation status

Australian Immunisation Register (AIR) Immunisation History Statement that is not more than two months old shows my child's vaccination status is  Up to date  Not up to date as at \_\_\_\_\_ (date of Statement)

OR

AIR Immunisation History Statement that is not more than six months old shows my child is on a catch up schedule as at \_\_\_\_\_ (date of Form)

OR

Immunisation Certificate issued by the Chief Health Officer as at \_\_\_\_\_ (date of Certificate)

Nationality (optional): \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_. Is the student to be withdrawn from religious instruction?  YES  NO

Student's First Language: \_\_\_\_\_

Is the student's descent: .....Aboriginal  YES  NO

.....Torres Strait Islander (TSI)  YES  NO

.....Both Aboriginal and TSI  YES  NO

Does the student speak a language other than English at home?..... YES  NO

Does the student mainly speak English at home? ..... YES  NO

(If more than one language, indicate the one that is  NO, English only

spoken most often.)  YES, other - please specify: \_\_\_\_\_

Australian Citizenship/Permanent Resident: ..... YES  NO

Date of Arrival in Australia: \_\_\_\_\_ Visa Sub-class No: \_\_\_\_\_ Visa Sub-class No Expiry Date: \_\_\_\_\_

International Fee Paying (if known): ..... YES  NO

Does the student receive any of the following allowances:

Secondary Assistance  Youth Allowance

Assistance for Isolated Children (AIC)  Abstudy

Previous School: \_\_\_\_\_

Reason for change of school (optional): \_\_\_\_\_

If previously enrolled in Home Education, specify the Education Region: \_\_\_\_\_

Movement reason (optional): \_\_\_\_\_

**CONFIDENTIAL**

Access Restriction - Is this student subject to any court orders in respect of their care, welfare and development? ..... YES  NO

If YES, please specify and attach supporting documentation.

Is this student in the care of the Department for Child Protection and Family Support's (CPFS) Director General? ..... YES  NO

If YES, please specify the name of the CPFS Case Manager, their CPFS District and their contact phone number.

**CONSENT FORMS**

Parent consent is sought in ATTACHMENT 2 for a variety of school related activities.

**STUDENT DETAILS – MEDICAL / HEALTH**

In addition to the information below, a separate form (student health care summary) available from the school, is to be completed for all students.

Note: For students identified as having health conditions requiring support at school, additional form/s will be provided by the school.

Does the student have a disability?  YES  NO If YES, please specify the disability/s:

\_\_\_\_\_

Please indicate where you have documentation about your child's disability in any of the following areas. Copies of this documentation will be required for school records

- |  |  |
|--|--|
| <input type="checkbox"/> Autism Spectrum Disorder            | <input type="checkbox"/> Severe Mental Disorder                      |
| <input type="checkbox"/> Deaf or Hard of Hearing             | <input type="checkbox"/> Global Developmental Delay (prior to age 6) |
| <input type="checkbox"/> Specific Speech Language Impairment | <input type="checkbox"/> Vision Impairment                           |
| <input type="checkbox"/> Intellectual Disability             | <input type="checkbox"/> Physical Disability                         |

Does the student have a medical condition or intensive health care need? YES  NO

If YES, please specify.

- |   |   |
|---|---|
| <input type="checkbox"/> Allergy – Anaphylaxis          | <input type="checkbox"/> Hearing condition (eg otitis media)                    |
| <input type="checkbox"/> Allergy – Other _____          | <input type="checkbox"/> Mental health or behavioural (eg depression, ADD/ADHD) |
| <input type="checkbox"/> Asthma                         | <input type="checkbox"/> Intensive Health Care Need (eg tube feeding)           |
| <input type="checkbox"/> Diabetes                       | <input type="checkbox"/> Other: _____   |
| <input type="checkbox"/> Diagnosed migraine/headaches   | _____   |
| <input type="checkbox"/> Seizure Disorder (eg epilepsy) | _____   |

Medical Practice (Name and Address): \_\_\_\_\_

\_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Dental Surgery Practice (if applicable, name and address): \_\_\_\_\_

Dentist's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

\_\_\_\_\_

Medicare No: \_\_\_\_\_ Valid to: \_\_\_\_ / \_\_\_\_\_

Health Care Card (if applicable):  YES  NO. If Yes, please provide no. \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Do you have ambulance cover? .....  YES  NO

(If there is a medical emergency parents or guardians are expected to meet the cost of the ambulance)

\_\_\_\_\_

**PARENT / GUARDIAN DETAILS**

**Parent/Guardian 1 Details**

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Second Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Please indicate relationship to the student: \_\_\_\_\_

Please indicate whether you have the:  Day to day care of the student **or**  Long term care of student.

Fees and charges billing:  YES  NO If no, who is responsible: \_\_\_\_\_

Postal Address (if different from student residential address):  
\_\_\_\_\_

Telephone (Home): \_\_\_\_\_ Email Address: \_\_\_\_\_

Occupation/Workplace location: \_\_\_\_\_

Telephone (Work): \_\_\_\_\_ Mobile No: \_\_\_\_\_

Do you mainly speak English at home? ..... YES  NO

Do you speak a language other than English at home?  NO, English only  YES, other - please specify:  
*(If more than one language, indicate the one that is spoken most often)*  
\_\_\_\_\_

What is the highest year of primary or secondary school you have completed?

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

What is the level of the highest qualification you have completed?

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

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

What is your occupation group? \_\_\_\_\_ *(Insert 1, 2, 3 or 4. Please select the appropriate parental occupation group from the list provided in ATTACHMENT 1. If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. However, if you have not been in paid work in the last 12 months, enter '8' above).*

**Parent/Guardian 2 Details**

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Second Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Please indicate relationship to the student: \_\_\_\_\_

Please indicate whether you have the:  Day to day care of the student **or**  Long term care of student.

Fees and charges billing:  YES  NO If no, who is responsible: \_\_\_\_\_

Postal Address (if different from student residential address):  
\_\_\_\_\_

Telephone (Home): \_\_\_\_\_ Email Address: \_\_\_\_\_

Occupation/Workplace location: \_\_\_\_\_

Telephone (Work): \_\_\_\_\_ Mobile No: \_\_\_\_\_

Do you mainly speak English at home? .....  YES  NO

Do you speak a language other than English at home?  NO, English only  YES, other - please specify:  
(If more than one language, indicate the one that is spoken most often)

What is the highest year of primary or secondary school you have completed?

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

What is the level of the highest qualification you have completed?

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

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

What is your occupation group? \_\_\_\_\_ (Insert 1, 2, 3 or 4. Please select the appropriate parental occupation group from the list provided in ATTACHMENT 1. If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. However, if you have not been in paid work in the last 12 months, enter '8' above).

**OTHER CONTACT(S) DETAILS**

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Second Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Please indicate relationship to the student: \_\_\_\_\_

Postal Address (if different from student residential address):

Telephone (Home): \_\_\_\_\_ Email Address: \_\_\_\_\_

Occupation/Workplace location: \_\_\_\_\_

Telephone (Work): \_\_\_\_\_ Mobile No: \_\_\_\_\_

**Please advise the school if there are any other contacts you would like recorded.**

**PRIVACY AND INFORMATION SHARING**

I understand that my child's enrolment information is confidential and will be kept as required by the Department of Education's record keeping procedures.

I understand that information on the Enrolment Form will be used to meet the Department of Education's reporting requirements to other Government departments or agencies. This includes providing the Department of Health with my child's immunisation status as requested.

**SIGNATURE**

Name of person enrolling student:

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Second Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Relationship to the student: \_\_\_\_\_

If this is an enrolment for Kindergarten, I declare this to be the only enrolment made.

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

**APPROVAL OF PRINCIPAL OR DELEGATE**

\_\_\_\_\_  
Signature  
Approved / Not approved  
Date: \_\_\_\_\_

**OFFICE USE ONLY**

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

Birth certificate       Passport       Travel document/s

Student's Residency status: ..  Local       Permanent Resident

Overseas Student: If yes, International fee paying: .....  YES  NO

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

Previous School: \_\_\_\_\_ Records received:  YES  NO

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

Contributions and Charges Billing:  PG1: \_\_\_\_%  PG2: \_\_\_\_%  Other: \_\_\_\_%

Official documentation:  PG1: \_\_\_\_  PG2: \_\_\_\_  Other: \_\_\_\_\_  
(including reports, to be sent to)

AIR immunisation history statement provided:  YES  NO

Date of issue: \_\_\_\_\_ Vaccination status is  Up to date  Not up to date

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

Other immunisation evidence provided: AIR Immunisation History Form  YES  NO

Immunisation Certificate issued by the Chief Health Officer  YES  NO

**Kindergarten students only** Eligibility for immunisation exemption approved: Code

Form/Class: \_\_\_\_\_ House Faction: \_\_\_\_\_

Approved by Principal:  NO  YES on (Date): \_\_\_\_\_

Entered on School Information system by: \_\_\_\_\_ on (Date): \_\_\_\_\_

Student leaves school: (Date) \_\_\_\_\_ Date Transfer Note Sent: \_\_\_\_\_

Destination: \_\_\_\_\_

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

**RETENTION AND TRANSFER OF STUDENT ENROLMENT RECORDS:**

- 1. Enrolment Applications (successful) – The School to retain for 5 years after last action and then destroy.**
- 2. Enrolment Applications (unsuccessful) – The School to retain for 2 years after last action and then destroy.**
- 3. Enrolment Register (Register of Admissions/Enrolment Cards used prior to the School Information System) – The School to retain for 7 years after last action and then archive and transfer to State Records Office only when advised by Corporate Information Services.**
- 4. Enrolment Records (managed in the School Information System) – The School must print out annually for all school leavers, the School must retain for 7 years after the last action and then archive and transfer to State Records Office only when advised by Corporate Information Services.**
- 5. Student files – The School must negotiate with the previous school at the local level the transfer within 5 school days.**

## ATTACHMENT 1

### Parent Occupation Groups

*Relates to questions in Parent 1 and Parent 2 sections of the Application for Enrolment form*

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

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



## Consent Form

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

### MEDIA CONSENT

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

- Yes, I give consent to my child to have his/her image and/or work published as described above.
- No, I do not give consent.

If you wish to view the [Student's online policy](#), please ask the school.

### INTERNET ACCESS

Student access to the internet is provided in accordance with the school policy. Student access is contingent on abiding by the users' Code of Conduct.

- Yes, my child has permission to access the internet in accordance with school policy.
- No, I do not give consent.

If you wish to view the [Student's online policy](#), please ask the school.

### VIEWING CONSENT

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

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

### LOCAL EXCURSIONS

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

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



## **MEDIA CONSENT**

### **PERMISSION TO PUBLISH STUDENTS IMAGES AND WORK FOR SCHOOL PURPOSES**

Dear Parent/Caregiver

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

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

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

If you agree to this use of your child's image and school work please complete the consent below and return this whole permission form to the school.

Once signed, the consent will remain effective until such time as you advise the school otherwise.

*Brian Johnson*  
*Principal*  
*Tuart Forest Primary School*

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### **PERMISSION (do not detach)**

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

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

Name of student: \_\_\_\_\_ Year: \_\_\_\_\_

Signature of parent: \_\_\_\_\_ Date: \_\_\_\_\_

*Note: This consent form should be filed by the school and a copy provided to the parent.*

## INTERNET ACCESS

### PERMISSION TO ACCESS DEPARTMENT ONLINE SERVICES

Dear Parent/Caregiver

Our school provides access to Department of Education online services. These enhance the contemporary learning opportunities available to students and the range of teaching tools available to staff to deliver the Western Australian Curriculum.

I am writing to seek approval for your child to be given access to these online services. The Department's online services currently provide students with access to:

- individual email and calendar accounts;
- the internet, with all reasonable care taken by central office and schools to monitor and control students' access to websites while at school;
- online teaching and learning services such as Connect, web-conferencing and digital resources;
- online file storage and sharing services; and
- these online services at locations other than school.

If you agree to your child using these online services, please sign the Acceptable Use Agreement form and complete the permission slip attached to this letter. Please explain the content of the Acceptable Use Agreement to your child before the permission slip is signed.

**Both forms should be returned to school so that an online services account can be created for your child.**

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

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

You should also be aware that general internet browsing not conducted via the Department's network is not monitored or filtered by the Department. The Department encourages close family supervision of all internet use by children in locations other than school, and strongly recommends the use of appropriate internet filtering software. Advice on managing internet use at home can found on the Office of the E-Safety Commissioner website ([www.esafety.gov.au/iparent](http://www.esafety.gov.au/iparent)).

*Brian Johnson*  
*Principal*  
*Tuart Forest Primary School*

## PERMISSION

Student's Full Name: \_\_\_\_\_

School: \_\_\_\_\_

Class / Form / Room: \_\_\_\_\_

### Parent / Caregiver

I give permission for my child to have an online services account.

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

I understand and agree that my child has responsibilities when using the online services provided at school for educational purposes, in accordance with the Acceptable Use Agreement for school students.

I also understand that if my child breaks any of the rules in the agreement that the principal may take disciplinary action in accordance with the Department's *Student Behaviour Policy and Procedures*.

Name of parent: \_\_\_\_\_

Signature of parent: \_\_\_\_\_ Date: \_\_\_\_\_

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

### Office use only:

Processed on: / / by (initials):

**Note:** This agreement should be filed by the school.

## ONLINE SERVICES ACCEPTABLE USE AGREEMENT

I agree to follow the rules set out below when I use the Department-provided online services:

- I will keep my password private and not share with other students.
- I will not let other people logon and/or use my online account.
- I will tell the teacher if I think someone is using my online account.
- If I find any information that is inappropriate or makes me feel upset or confused I will tell a teacher about it. Some of these things may include violence, racism, pornography, or content that is offensive, intimidating or encourages dangerous or illegal things.
- I understand the school and the Department of Education can monitor my use of online services.
- I will use appropriate language in all internet communications.
- If I use other people's work taken from the internet as part of my own research and study I will acknowledge them as the owner.
- I will check with the teacher before sharing images or giving information about myself or anyone else when using online services.
- I will take care of the computers, computer systems or computer networks of the school, the Department of Education or any other organisation.

I understand that

- I am responsible for my actions while using online services and may be held responsible for any breaches caused if I allow any other person to use my online account;
- If I misuse any online services I may be held liable and the principal may take further action.

**Name of student:** \_\_\_\_\_

**Signature of parent:** \_\_\_\_\_

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

**Office use only:**

*Processed on:    /    /    by (initials):*

**Note:** *This agreement should be filed by the school and a copy kept by the student/parent.*

## Notification to disclose personal information to third party services

The following third party services are used as part of the educational programs at Tuart Forest Primary School. Please contact the school if you have any queries.

Name of Service	Type of service	What do I need to know	Further information – i.e. privacy policy of third party service
Functional Solutions	Library Management System	<p><b>Information provided:</b> Student name, class, school, and student email.</p> <p><b>How the information is used:</b> To provide a profile for students in order to borrow books and communicate with the librarian.</p> <p><b>Where the information is stored:</b> Sydney, Australia.</p>	<p><a href="https://www.functionalsolutions.com.au/tsandcs">https://www.functionalsolutions.com.au/tsandcs</a></p>
Google for Education	Information Production & Sharing	<p><b>Information provided:</b> Student name, class, school, and student email.</p> <p><b>How the information is used:</b> To provide a profile for students in order create and share information using the Google suite of apps</p> <p><b>Where the information is stored:</b> Google data centres (24 data centres located in the USA)</p>	<p><a href="https://edu.google.com/why-google/privacy-security/?modal_active=none">https://edu.google.com/why-google/privacy-security/?modal_active=none</a></p>
Oxford Owl Seesaw Class Dojo Mathletics Scholastic Learning Zone CARS & STARS Soundwaves Scratch	Various curriculum content areas and communication platforms between parents, teachers and students	<p><b>Information provided:</b> Student name, class, school</p> <p><b>How the information is used:</b> To provide a profile for students to log in and access relevant curriculum and share work with parents</p> <p><b>Where the information is stored:</b> Various</p>	<p><a href="https://global.oup.com/privacy?cc=au">https://global.oup.com/privacy?cc=au</a>  <a href="https://web.seesaw.me/privacy">https://web.seesaw.me/privacy</a>  <a href="https://www.classdojo.com/privacy/">https://www.classdojo.com/privacy/</a>  <a href="https://www.3plearning.com/privacy/">https://www.3plearning.com/privacy/</a>  <a href="https://qa.scholasticlearningzone.com/docs/Scholastic_Learning_Zone_Privacy_Policy.pdf">https://qa.scholasticlearningzone.com/docs/Scholastic_Learning_Zone_Privacy_Policy.pdf</a>  <a href="https://app.carsandstars.com.au/users/privacypolicy">https://app.carsandstars.com.au/users/privacypolicy</a>  <a href="https://www.fireflyeducation.com.au/about/privacy">https://www.fireflyeducation.com.au/about/privacy</a>  <a href="https://scratch.mit.edu/privacy_policy">https://scratch.mit.edu/privacy_policy</a></p>

ACER NAPLAN	Online student assessments	<p><b>Information provided:</b> Student name, date of birth, class, school, student number</p> <p><b>How the information is used:</b> To provide a profile for students to log in and access academic assessment tasks</p> <p><b>Where the information is stored:</b> Sydney, Australia.</p>	<p><a href="https://www.acer.org/privacy">https://www.acer.org/privacy</a> <a href="https://www.nap.edu.au/naplan/privacy">https://www.nap.edu.au/naplan/privacy</a></p>
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If you agree to your child using these online services, please tick and sign this Online Permission Form where appropriate sign and return this page to your child's class teacher. Please explain the content of the *Acceptable Use Agreement* to your child before the permission slip is signed.

**This form needs to be returned to school** before your child can access any school devices or online services.

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

Yours sincerely

**Brian Johnson**

**Principal – Tuart Forest Primary School**

I consent to my child's information being provided, if required, to each of the above service providers until the end of their schooling at Tuart Forest Primary School.

No, I do not give consent

Parent/Guardian Name:	Student Name:
Date:	Student Year Level:
Parent Signed:	Student Signed:

