Jindalee
Be Safe Be Respectful Be a Learner

JINDALEE STATE SCHOOL
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Jindalee, 4074
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ENROLMENT APPLICATION PACK

STUDENT DETAILS	
Student Family Name:	
Student Given Name/s:	
Student Date of Birth	
Student's Primary Residential Address:	

PARENT/CARER DETAILS	
Parent/Carer Name:	
Contact Number:	
Email Address:	
I have a QParents account:	☐ YES ☐ NO

Do you reside in-catchment? ☐ YES ☐ NO (*https://www.qgso.qld.gov.au/maps/edmap/)*

Does your student have a sibling currently attending Jindalee State School? ☐ YES ☐ NO

Your application must include copies of:

(we require ALL the below documentation before we process your application; incomplete applications will not be accepted)

- Proof of residential address within our catchment area *(please provide **one primary** and **one secondary** source)*:
  - **One primary source** – *current lease agreement, rates notice or unconditional sale agreement*
  - **AND**
  - **One secondary source** – *a utility bill (e.g. electricity, gas) showing the same address and parent/carer name*
- We will also need to sight your student's birth certificate [Reg #_____]

Where relevant (please provide photocopies of documentation):

- Family court orders or care arrangements
- Details of medical conditions, including mental health conditions
- Details of disability or learning difficulty
- Transfer note from previous school (if applicable)

NB: Pages **1-20** are **REQUIRED** to be completed. Pages **22-28** are to be completed **if applicable.**

Please use the Checklist on page 30 to ensure your application is complete before submitting to our office (114 Burrendah Road, Jindalee) or via email: enrolments@jindaleess.eq.edu.au.

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 stateschool:

- if the school has a School Enrolment Management Plan or an Enrolment Eligibility Plan (enrolment is subject to eligibility underthe 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 (applicationis 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 aspart of a flexible arrangement under s.183 ofthe *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 whichschool 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 apreferred 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.

APPLICATION FOR STUDENT ENROLMENT FORM

Instructions

Please refer to the *Application to enrol in a Queensland state school* information sheet (above) 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* **(as per birth certificate)**			
Legal given names* **(as per birth certificate)**			
Preferred family name		**Preferred given names**	
Gender*	☐ **Male** ☐ **Female**	**Date of birth***	_____/_____/_____
Copy of birth certificate available to show school staff*	☐ **Yes** ☐ **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. 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.	
For prospective matureage students, proof of identity supplied and copied*	☐ **Yes** ☐ **No**	Prospective mature age students must provide photographic identification which proves their identity: • current driver's licence; or • adult proof of age card; or • current passport.	

APPLICATION DETAILS

Has the prospective student ever attended a Queensland state school?	☐ Yes ☐ 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?	☐ Yes ☐ 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 studentof Aboriginal or Torres Strait Islander origin?	☐ No ☐ Aboriginal ☐ Torres Strait Islander ☐ Both Aboriginal and Torres Strait Islander

FAMILY DETAILS

Parents/carers	Parent/carer 1	Parent/carer 2
Family name*		
Given names*		
Title	☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr	☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr
Gender	☐ Male ☐ Female	☐ Male ☐ Female
Relationship to prospective student*		
Is the parent/carer an emergency contact?*	☐ Yes ☐ No	☐ Yes ☐ No
1st Phone contact number*	Work/home/mobile	Work/home/mobile
2nd Phone contact number*	Work/home/mobile	Work/home/mobile
3rd Phone contact number*	Work/home/mobile	Work/home/mobile
Email		
Occupation		
What is the occupation group of the parent/carer?	☐ (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 monthsor has retired in the last 12 months, please use the last occupation. If parent/carer 1 has not been in paid work in thelast 12 months, enter '8')	☐ (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 monthsor has retired in the last 12 months, please use the last occupation. If parent/carer 2 has not been in paid work in thelast 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 morethan one language, indicate the one that is spoken most often)	☐ No, English only ☐ Yes, other – please specify _____ Needs interpreter? ☐ Yes ☐ No	☐ No, English only ☐ Yes, other – please specify _____ Needs interpreter? ☐ Yes ☐ No
Is the parent/carer anAustralian citizen?	☐ Yes ☐ No	☐ Yes ☐ No
Is the parent/carer a permanent resident of Australia?	☐ Yes ☐ No	☐ Yes ☐ No

FAMILY DETAILS (continued)

Parents/carers	Parent/carer 1	Parent/carer 2
Address line 1		
Address line 2		
Suburb/town		
State	Postcode	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	Postcode
Parent/carer school education	**What is the *highest* 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 *highest* 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	☐	☐
Year 10 or equivalent	☐	☐
Year 11 or equivalent	☐	☐
Year 12 or equivalent	☐	☐
Parent/carer non-school education	**What is the level of the *highest* qualification parent/carer1 has completed?**	**What is the level of the *highest* qualification parent/carer 2has completed?**
Certificate I to IV (including trade certificate)	☐	☐
Advanced Diploma/Diploma	☐	☐
Bachelor degree or above	☐	☐
No non-school qualification	☐	☐

COUNTRY OF BIRTH*

In which country was the prospective student born?	☐ **Australia** ☐ **Other (please specify country)** _____ **Date of arrival in Australia**_____/_____/_____
Is the prospective studentan Australian citizen?	☐ **Yes** ☐ **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?	☐ **No, English only** ☐ **Yes, other – please specify** _____

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

Permanent resident	**Complete passport and visa details section below**	
Student visa holder	**Date of arrival in Australia**_____/_____/_____	**Date enrolment approved to:**_____/_____/_____
	EQI receipt number:	
Temporary visa holder	**Complete passport and visa details section below. Temporary visa holders must obtain an 'Approval to enrol in a stateschool' from EQI**	
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 comefrom?	☐ **Queensland** ☐ **Interstate** ☐ **Overseas**
Previous education/activity	☐ **Kindergarten** ☐ **School** ☐ **Part-time employment** ☐ **Full-time employment** ☐ **VET** ☐ **Home education** ☐ **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.	☐ **Yes** ☐ **No**
	If 'Yes', please nominate the religion:
Parents/carers may change these arrangements at any time by notifying the principal in writing.	

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)		
1st phone contact number*	Work/home/mobile	Work/home/mobile
2nd phone contact number*	Work/home/mobile	Work/home/mobile
3rd 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 wellas during school excursions, school camps, sports and other school activities. DoE will not use this information to make a decision about a prospectivestudent'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 becompleted 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 officeand copies of Action or Emergency Health Plans kept with the student.

No known medical conditions	☐		
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 ororthotics)? This is for the purpose of informing planning for school activities such as sport and school excursions.	☐ **No** ☐ **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)		☐ **Yes** ☐ **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?	☐ **Yes** ☐ **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 *Family Law Act 1975* concerning the welfare, safety or parenting arrangements of the prospective student?	☐ Yes ☐ 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?	☐ Yes ☐ 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? ☐ Yes ☐ No (applicant advised in writing) If no, indicate reason: Does not meet School EMP or Enrolment Eligibility Plan requirements Prospective student is mature age and school is not a mature age state school Does not meet Prep age eligibility requirement Prospective student is subject to suspension from a state school at the time of enrolment applicationDoes not meet requirements for enrolment in a state special school Does not have an approved flexible arrangement with the school School does not offer year level prospective student is seeking to be enrolled inProspective student has no remaining semester allocation of state education						
Date enrolment processed	/ /	Year level		Roll Class		EQ ID	
Independent student	☐ Yes ☐ No			Birth certificate/passport sighted, numberrecorded and DOB confirmed	☐ Yes ☐ No Number:		
Is the prospective student over 18 years of age at the time of enrolment?				☐ Yes ☐ No			
If yes, is the prospective student exempt from the mature age studentprocess?				☐ Yes ☐ No			
If no, has the prospective mature age student consented to a criminalhistory check?				☐ Yes ☐ No			
School house/ team				EAL/D support	☐ Yes ☐ No ☐ To be determined		
FTE		Associated unit		Visa and associated documents sighted	☐ Yes ☐ No		
EQI category				SV – student visa TV – temporary visa DS – dependent – parent on student visa	EX – exchange student DE – distance education		

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

Parental Occupation Groups for use with Parent/Carer Details

Group 1: Senior management in large business organisation, government administration and defence, and qualifiedprofessionals

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/refuge/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 month

STUDENT ENROLMENT AGREEMENT

This enrolment agreement sets out the responsibilities of the student, parents/carers and the school staff in regard to the education of students enrolled at Jindalee State School. Further information is available in our full "Student Code of Conduct" on our school website.

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 Student Code of Conduct, including not bringing items to school which could be considered as weapons (e.g. dangerous items such as knives)
- meet homework requirements and wear the school's uniform
- respect the school property

Responsibility of parents/carers to:

- ensure your student attends school on every school day for the educational program in which they are enrolled
- advise the school as soon as possible if your student is unable to attend school and reason/s why (e.g. student is sick)
- attend open meetings for parents/carers
- let the school know if there are any problems that may affect your student's ability to learn
- ensure your student 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 student and assist your student to achieve maturity, self-discipline and self-control
- not allow your student 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 student is in out-of-home care
- keep school informed of any changes to your contact details or your student's details, such as home address, email address and phone number
- ensure the school is aware of any changes to your student's medical details

Responsibility of school staff to:

- design and implement engaging and flexible learning experiences for individuals and groups of students
- inform parents/carers regularly about how their student is 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 and parents/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 Student Code of Conduct and the Uniform Policy
- ensure that parents/carers are aware that the school does not have personal accident insurance cover for students
- advise parents/carers of extra-curricular activities operating at the school in which their student 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
- contact parents/carers as soon as possible if the school is concerned about the student's school work, behaviour, attendance or punctuality
- notify parents of an unexplained absence of their student as soon as practicable on the day of the student's absence (allowing time for parents/carers to respond prior to the end of the school day)
- deal with complaints in an open, fair and transparent manner in accordance with departmental policy, Customer Complaints Management
- treat students and parents/carers with respect

I acknowledge that I have read and understood the responsibilities of the student, parents/carers and the school staff outlined above:

STUDENT			
Student Name:		Year:	
Student Signature:		Date:	
PARENT/CARER			
Parent/Carer Name:			
Parent/Carer Signature:		Date:	

OFFICE USE			
School Representative:		Date:	

STUDENT RESOURCE SCHEME

The Student Resource Scheme (SRS) is a user-charging scheme operated by schools to provide parents with a mechanism to access individual student resources that are not funded by the government.

Government funding for schools does not extend to individual student resources and equipment for their personal use or consumption. Supply of these items, such as textbooks and personal laptops/iPads, is the responsibility of the parent.

The objective of the scheme is to provide parents a convenient and cost-effective alternative to individual supply of resources for their students. Participation in the SRS is optional, and no obligation is placed on a parent to participate.

Terms and conditions for participating in the scheme are provided below. Information is also provided on the Textbook and Resource Allowance (TRA) where applicable.

This Participation Agreement Form applies for the duration of a student's enrolment at the school, however parents who are participating in the scheme can choose to opt out from the SRS in future years by completing a new Participation Agreement Form. Any new Participation Agreement Form submitted annually and received by the school will supersede the previous form lodged.

Parents pay the annual participation fee in accordance with the selected payment arrangement. If a student joins the school mid-year, a pro-rata participation fee may apply.

Parents not participating in the scheme must provide their student with all items that would otherwise be provided by the scheme as detailed in the information provided by the school. Parents can choose to join the SRS in future years by completing a new Participation Agreement Form.

To assist schools in managing and administering the scheme, parents are requested to complete the Participation section of this form and return it to the school.

If parents have not completed and returned the form before the due date indicated by the school in the SRS Annual Parent Information documents, the school will take the view that the parent does not wish to participate.

Payment

On agreeing to participate in the SRS, a parent agrees to pay the participation fee as advised and invoiced by the school. For families experiencing financial hardship, please contact the school as soon as possible to discuss options available.

STUDENT RESOURCE SCHEME CONSENT FORM

Participation

School name: Jindalee State School

Please answer *

- ◯ **YES - I wish to participate in the Student Resource Scheme.** I have read and understand the Terms and Conditions of the scheme and agree to abide by them and to pay the annual participation fee in accordance with the selected payment arrangement. I understand that I can opt out of participation in the SRS in any year by completing a new Participation Agreement Form.
- ◯ **NO - I have read the terms and conditions and I do not wish to participate in the Student Resource Scheme.** I understand I must provide my child with all items that would otherwise be provided by the SRS as detailed in the information provided by the school. I understand that I can choose to join the SRS in future years by completing a new Participation Agreement Form.

Student name

Parent name

Parent signature

Date

Privacy Notice

The Department of Education collects the information you complete on the Participation Agreement Form in order to administer the Student Resource Scheme (SRS). The information will only be accessed by school employees administering the SRS. However, if required, some of this information may be shared with departmental employees for the purpose of debt recovery. Your information will not be given to any other person or agency unless you have given permission or the Department of Education is authorised or required by law to make the disclosure.

Terms and Conditions

Definition

1. Reference to a “parent” is in accordance with the definition in the Education (General Provisions) Act 2006 and refers equally to an independent student.

Purpose of the SRS

2. In accordance with the Act, the cost of providing instruction, administration and facilities for the education of students enrolled at state schools who are Australian citizens or permanent residents, or children of Australian citizens or permanent residents, is met by the State.
3. Parents are directly responsible for providing textbooks and other personal resources for their children while attending school.
4. The SRS enables a parent to enter into an agreement with the school to provide the resources as advised by the school for a specified annual participation fee.

Participation in the SRS

5. Participation in the SRS is optional and parents are under no obligation to participate.
6. The school will provide parents with a list of resources supplied by the SRS to enable parents to assess the cost effectiveness of participation.
7. Parents indicate whether or not they wish to participate in the SRS by completing this Participation Agreement Form.
8. Parents must complete and sign the Participation Agreement Form and return it to the school by the advertised date.
9. This agreement is for the duration of the student’s enrolment at the school, unless a new Participation Agreement Form is completed.
10. Parents are given the option annually to choose whether to participate in the SRS or not by completing this form.
11. Where a parent signs up to participate in the SRS they are agreeing to pay the annual participation fee for the items provided by the SRS.
12. Payment of the participation fee implies acceptance of the SRS including the Terms and Conditions irrespective of whether or not the signed form has been returned.
13. Where a student starts at the school during the school year, the parent may be entitled to pay a pro-rata participation fee to participate based on a 40-week school year.
14. Where a participation fee has been paid and a student leaves the school during the year, the school must determine if the parent is eligible for a pro-rata refund. This will also take into account any pro-rata of the Textbook and Resource Allowance (TRA) (see Additional Information regarding TRA eligibility) and any outstanding SRS debts (including any debts from damaged or non-returned items). Where the cost of outstanding debts is higher than the calculated refund, the parent is liable to pay this balance of funds.

Non-Participation in the SRS

15. Parents who choose not to participate in the SRS are responsible for providing their student with all items that would otherwise be provided by the SRS to enable their student to engage with the curriculum.
16. The school will provide non-participating parents with a list of resources the parents are required to supply for their child.
17. All items included in the SRS must be able to be independently sourced, purchased and supplied by parents who choose not to participate in the SRS.
18. As the SRS operates for the benefit of participating parents and is funded from participation fees, SRS resources will not be issued to students whose parents choose not to participate in the SRS. The Resources.
19. SRS funds received by the school will only be expended on student resources outlined in the school’s SRS and will not be expended on other items or used to raise funds for other purposes.
20. In return for payment of the participation fee, the SRS will provide the participating student with the entire package of resources for the specified participation fee. It is not available in parts unless specifically provided for by the school in the fee structure.
21. The resources, as determined and advised by the school may be:
    1. retained by the student and used at their discretion; or
    2. used/consumed by the student in the classroom; or
    3. hired to the student for their personal use for a specified period of time
22. All SRS resources hired to a student for their temporary use remain the property of the school. The resources must be returned by the agreed date or if the student leaves the school.
23. Parents are responsible for ensuring that any hired SRS resources provided for their child’s temporary use are kept in good condition.
24. The school administration office must be notified immediately of the loss or damage to any hired item.
25. Where a hired item is lost, not returned, or damaged, parents will be responsible for payment to the school of the value of the item or its repair.
26. The replacement cost of any resource may be up to the maximum value (subject to depreciation where appropriate) of the acquisition cost to the school.
27. Parents may be responsible for supplying their child with other resources not specified in the SRS as advised by the school.

Payment Arrangements

28. Payment of the participation fee may be made in whole, as per a nominated payment plan, or for another amount as approved by a Principal.
29. Payment of the participation fee must be made as per the payment methods nominated by the school.
30. Any concessions relating to the participation fee will be at the discretion of the Principal.

Debt Management

31. Payment of the participation fee is a requirement for continued participation in the SRS.
32. Non-payment of the participation fee by designated payment date(s) may result in debt recovery action in accordance with the Department’s Debt Management Procedure http://ppr.qed.qld.gov.au/corp/finance/accounts/Pages/Debt-Management.aspx. Parents’ Experiencing Financial Hardship
33. Parents experiencing financial hardship who are currently participating in or wish to participate in the SRS should contact the school to discuss options.
34. Principals may vary payment options, negotiate alternative arrangements and/or waive all or part of the participation fee for parents experiencing financial hardship.
35. The onus of proof of financial hardship is on the parent.
36. The school may require annual proof of continuing financial hardship.
37. All discussions will be held in the strictest confidence

Additional Information

Textbook and Resource Allowance (TRA)

- The Queensland Government provides financial assistance to parents of students in Years 7 to 12, to offset the costs of textbooks and other resources. Assistance is provided in the form of a TRA which is paid through the school. Refer to the department’s website for current TRA rates https://education.qld.gov.au/ about-us/budgets-funding-grants/grants/parents-and-students/textbook-resource-allowance.
- The TRA is used to offset the fees associated with participation in the SRS.
- Parents not participating in the SRS will receive the TRA directly from the school.
- Parents not participating in the SRS should contact the school directly if they do not automatically receive the payment.

MEDIA CONSENT

Introduction to the State School Consent Form for Jindalee 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://jindaleess.eq.edu.au/
- Facebook: https://www.facebook.com/JindaleeStateSchool
- Other:
  - https://jindaleess.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 consent, express a limited consent, or withdraw consent please contact **The Enrolments Team, Enrolments Officer** using email address **enrolments@jindaleess.eq.edu.au** or phone number **37255777.**

The Enrolments Team should be contacted if you have any questions regarding consent.

MEDIA CONSENT FORM

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)

Full name of individual (**student**) Date of birth

Name of school: **Jindalee State School**

Name to be used in association with the person's personal information and material *

◯ Full Name ◯ First Name ◯ No Name ◯ Other Name

If other name, please provide the name to be used

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

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 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

- Timeframe of consent: **duration of enrolment.**

5. Limitation of Consent

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

_____

_____

6. Consent and Agreement

School name: Jindalee State School

CONSENTER - I am: *

◯ parent/carer of the identified person in section 1

◯ the identified person in section 1 (if a mature/independent student)

◯ 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 consenter

_____ _____

Signature or mark of consenter Date

_____ _____

Signature or mark of student 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.

ICT AND NETWORK USAGE AGREEMENT FORM

Student ICT Network Usage Agreement:

I understand that the school's information and communication technology (ICT) 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 stored on computers around the world.
While I have access to the school's ICT 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 pictures or 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 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 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 facilities and devices, appropriate action may be taken as per the school's Behaviour Management Policy, which may include loss of access to the network (including the internet) for a period of time.

I have read and understood the rules and behaviour expectations included in this agreement. I agree to abide by the above rules identified in this agreement. (Please note: Children from Prep to Year 3 inclusively are exempt from signing the student section below.)

Student Name Signature Date

The Department of Education and Training through its Information Management (IM) Procedure is collecting your personal information in accordance with the Education General Provisions Act 2006 in order to ensure:

- appropriate usage of the school network

The information will only be accessed by authorised school employees to ensure compliance with its Information Management (IM) 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.

Parent/Guardian ICT Network Usage Agreement:

I understand that the school provides my child with access to the school's information and communication technology (ICT) 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 on computers from around the world; that the school cannot control what is on those computers; 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 students/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 facilities and devices. Furthermore I will advise the school if any inappropriate material is received by my student/child that may have come from the school or from other students.
I believe my child understands this responsibility, and I hereby give my permission for him/her to access and use the school's ICT 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 facilities and devices for some time.

I have read and understood the rules and behaviour expectations included in this agreement. I agree to abide by the above rules identified in this agreement.

Student Name Signature Date

The Department of Education and Training through its Information Management (IM) Procedure is collecting your personal information in accordance with the Education General Provisions Act 2006 in order to ensure:

- appropriate usage of the school network

The information will only be accessed by authorised school employees to ensure compliance with its Information Management (IM) 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.

JAGS OVAL CONSENT FORM

While at Jindalee State School, students participate in a range of outdoor curriculum experiences and co-curricular activities. Our school borders on the Jindalee JAGS oval and we are fortunate enough to utilise this space throughout the school year. Students engage in Cross Country and Athletics carnivals, various sports training sessions at break times, and Physical Education lessons which include the use of the JAGS oval.

As such, we require permission for your child to leave the school grounds for the express purpose of participating in school-based activities on the Jindalee JAGS oval during school hours.

Risk assessments are carried out for all activities taking place outside of the school grounds, and appropriate safety measures are taken. This consent allows your child to participate in activities on JAGS oval for the duration of their enrolment at Jindalee State School. Consent can be withdrawn at any time by emailing Jindalee State School at info@iindaleess.eq.edu.au.

Privacy Statement

The Department of Education is collecting the personal information in this form in order to:

- *obtain consent for the named child/student to participate in the named off-site activity;*
- *help coordinate the off-site activity;*
- *respond to any injury or medical condition that may arise during or as a result of the off-site activity; and*
- *update school records where necessa,y.*

Where applicable, the information is being collected in accordance with section 102 of the Education and Care Services National Regulations and the Education and Care Services Regulation 2013 (Qld).

The information will only be accessed by authorised departmental staff and stored securely. The information will be dealt with in accordance with the confidentiality requirements of, as applicable, section 426 of the Education (General Provisions) Act 2006 (Qld), the information Privacy Act 2009 (Qld), and/or the Privacy Act 1988 (Cth). The information will not be disclosed to any other person or agency unless we

Activity Risks and Insurance

Please note that the Department of Education does not have personal accident insurance cover for children/students. If your child is injured as a result of an accident or incident while participating in the activity, all costs associated with the injury, including medical costs are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If you have private health insurance, some costs may also be covered by your provider. Any other costs must be covered by parents/carers. It is up to all parents/carers to decide the type/s and level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow the child/student to participate in this activity.

Consent

By signing this form, I agree to all the following statements:

- I have read all the information contained in this form in relation to the activity (including any attached material)
- I am aware that the department does not have personal accident insurance cover for students.
- **I give consent for the named child/student, _____ to participate in school-based activities taking place on the JAGS oval for the duration of their enrolment at Jindalee State School.**
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment the child/student may reasonably require, including contacting their doctor.
- I accept liability for all reasonable costs incurred by the department in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the department the full amount of those costs.
- I have provided the school with all relevant details of the child/student's medical or physical needs on registration /enrolment and where relevant have updated this information.
- I give consent for student contact information to be shared in relation to this activity in compliance with relevant Queensland Chief Health Officer's Directions.

Parent/Carer	Name:	
	Phone number:	
	Email address:	
	Signature:	Date:

The following section - pages **22-28**, are to be completed **ONLY if applicable to your child.**

- If your child requires additional support, has a disability or other specific needs, please complete the **Additional Learning Information** section (page 22)
- If you consent to Jindalee State School contacting external service providers, please complete the **Third Party Consent form** (page 24-25)
- If your child requires medication throughout the school day, please complete the **Consent to Administer Medication form** (page 27-28)

Please use the Checklist on page 30 to ensure your application is complete before submitting to our office (114 Burrendah Road, Jindalee) or via email: enrolments@jindaleess.eq.edu.au.

ADDITIONAL LEARNING INFORMATION (if applicable)

The information provided below assists the school to support your student. All information is considered when planning class placements and supports for each student.

Please provide supporting documentation if applicable.

1. Does your student have a diagnosed disability?

☐ **No** ☐ **Yes** - please tick the category below and include any further information required to make reasonable adjustments to their learning.

- ☐ Autism Spectrum Disorder (ASD)
- ☐ Hearing Impairment (HI)
- ☐ Intellectual Disability (ID)
- ☐ Attention-Deficit/Hyperactivity Disorder (ADHD)
- ☐ Other:_____
- ☐ Physical Impairment (PI)
- ☐ Vision Impairment (VI)
- ☐ Specific Learning Disorder
- ☐ Dyslexia
- ☐ N/A

2. Does your student have other specific learning needs? If yes, please provide further information.

☐ **No** ☐ **Yes** - please provide further information:

- ☐ Social/emotional difficulties
- ☐ General learning difficulties
- ☐ N/A
- ☐ Attention and concentration difficulties
- ☐ Behavioral difficulties

3. Does your student receive additional assistance at school to support their learning needs?

☐ **No** ☐ **Yes** - please provide further information:

- ☐ Teacher aide support
- ☐ Numeracy support or intervention
- ☐ Literacy support or intervention
- ☐ EAL/D
- ☐ N/A
- ☐ Reading support or intervention
- ☐ Guidance or Chaplain support
- ☐ Social assistance or social skill building programs

4. Does your student have a personalised learning record?

☐ **No** ☐ **Yes** - please provide details

5. Is your student on an ICP? (working towards learning goals at another year level)

☐ NO ☐ YES ICP level:_____ Specific subject/s:_____

THIRD PARTY CONSENT FORM (if applicable)

We require this form to be completed if you are nominating any medical provider/s (please add names and contact details) you are consenting us to contact.

You are welcome to add any additional medical providers you may wish for us to have permission to contact in the future.

Introduction to Consent Form to Share Student Personal Information with Third Parties

This letter explains why we are seeking your consent to share your child's personal information and informs you about how we will use, record information received and disclose your child's personal information and materials with third party (non-departmental) individuals and organisations. 'Disclose' means giving personal information to another person or entity, or giving them access to the information.

This letter outlines:

- what information we use, collect, record and disclose; and
- where and how we will use the materials.

Examples of personal information, which may be used, recorded and disclosed (subject to consent):

- the student's first and last name;
- date of birth and/or age;
- name of their school;
- year level;
- school records;
- observations about the student's behaviours and classroom interactions;
- difficulties or progress;
- academic performance;
- health/medical/therapy reports and assessments; and
- any other information relevant to the stated purpose.

The specific personal information and materials to be covered by the consent are listed in the consent form.

Purpose of the consent

The Department of Education, including schools and regional offices (department), needs consent in writing before it uses, records or discloses personal information, or materials, with third party (non-departmental) individuals and organisations. The purpose/s are described in the consent form. The attached form is a record of the consent provided.

Voluntary

It is your choice whether to give consent.

How long this consent will be in place

The consent form states the duration of your consent. You can withdraw/limit your consent at any time. We may ask for a new consent form from you if we later identify other third parties, additional personal information, or different purposes that need your consent but are not covered by this consent form.

Consent may be withdrawn or limited

You can withdraw your consent at any time. You can also limit consent; i.e. you may wish to limit:

- the information that you agree to be used, collected, recorded or disclosed;
- the proposed purpose/s for which the information is being collected, recorded or disclosed; or
- who that information will be collected, recorded or disclosed with.

If you wish to limit or withdraw consent please notify the departmental contact (specified below) in writing (by email or letter). If you provide an address the contact will confirm the receipt of your request.

Who to contact

To return a consent form, express a limited consent or withdraw consent please contact Jindalee State School. Please contact our Head of Inclusion if you have any questions regarding consent.

Consent Form to Share Student Personal Information with Third Parties

This consent form allows the Department of Education, including school and regional staff (department), to communicate with the third parties listed below, including disclosing personal information to and recording personal information received from, those third parties. It authorises the third parties to disclose the personal information and materials (listed below) to the department. Information that is shared will be limited to that listed on this form. Information may be written or spoken.

Parent/carer to complete for students under 18 years of age. Independent students may complete on their own behalf and if under 18 years of age, a witness is required.

This consent is for:			
Student's name		**Date of birth**	
State school name	Jindalee State School		

I consent to the following personal information and/or materials of the student being used, recorded, collected and/or disclosed:

Student's materials, and student's first and last name, date of birth, age, school name, year level as well as other personal information as outlined below:

School records | Student materials

Observations including behaviours | Peer interactions

Any difficulties and progress | Medical/specialist letters and reports

Between department staff and the following third party individuals and/or organisations:
(for example: where possible please identify the name of the individual AND their organisation/medical practice/business; the name of the government agency; or the name or description of health praticitioner or provider such as a medical specialist; psychologist; therapist etc)

To be used for the following approved purpose/s only:
(for example: to discuss support strategies; to discuss personal care requirements)

To discuss medication | To complete questionnaires

To discuss reports or specialist letters | To discuss further referrals

To discuss observations

Timeframe for consent:

Consent applies until / / but not longer than 12 months or until you decide to limit or withdraw consent in writing.

Consent and agreement

I am (tick the applicable box):

☐ parent/carer of the identified student ☐ the student (if a mature/independent student*)

**Please note - If this box is checked, Department staff should check the student record for documentation of any decision about Gillick competence of the consenting student.*

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 Department of Education, including school and regional staff (department) recording, using and/or disclosing the personal information and materials to the third parties identified in this Consent Form; and
- authorise those third parties to disclose the personal information and materials to the department for the purposes and durations specified (above) on this Consent Form.

I understand and acknowledge that the personal information and materials will only be accessed by appropriately authorised department staff and disclosed or shared with third parties to which I have provided consent, unless required by law.

Print name of student:	
Print name of parent/carer:	

Parent/carer signature: ……..… **Date**

Student mark or signature (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 consenter is an independent student and under 18 years of age the section below must be completed.

Statement by person witnessing consent from an independent student

I have witnessed the mark or signature of an independent student on the consent form. The student has had the opportunity to ask questions. I believe that the student has given consent freely and understands the effect and implications of giving consent.

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 consent form to the potential consenter, and to the best of my ability made sure that the person understands that the following will be done:

1. the identified personal information and materials will be used in accordance with the consent form
2. in accordance with procedures the department will cease using the identified personal information and materials from the date the department receives a written withdrawal of consent.

I confirm that the person was given an opportunity to ask questions about the explanatory letter and consent form, and all the questions asked by the consenter 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 consenter.

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

Signature of person taking the consent .....

Date .....

The Department of Education (the department) is collecting the personal information on this form in order to obtain consent for department staff (including school and regional staff) to use, record and dislose that personal information. The information will be used, recorded and disclosed by authorised department employees for the purposes outlined on the form. Also personal information may be used or disclosed to third parties as authorised in this form or where authorised or required by law. This 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 department contact in the first instance.

CONSENT TO ADMINISTER MEDICATION (if applicable)

PLEASE NOTE:

For medication to be administered at school or during school-related activities, there must be medical authorisation for the student to have that medication, and the medication must be in its original container with intact packaging.

Examples of medical authorisation include:

- a pharmacy label with both the student's and doctor's name on it;
- a signed letter from a doctor;
- a medication order from a dentist;
- an Action Plan signed by a doctor or nurse practitioner.

See below for examples of health conditions, medications and associated documentation:

Health condition/ reason for medication	**Example of medication**	**Documentation completed by doctor or other prescribing health practitioner**
Asthma	Asthma puffer	*Asthma action plan*
Anaphylaxis	EpiPen	ASCIA *Anaphylaxis Action Plan*
Diabetes	Insulin injection, insulin pump	Department of Education *Medication order to administer 'as-needed' medication at school* or medication order or other written instructions from prescribing health practitioner and *diabetes management plan*
Other types of emergency medication e.g. for seizures	Midazolam	Department of Education *Medication order to administer 'as-needed' medication at school*
Medication required 'as needed' for minor or non-emergency symptoms	Ointment for skin allergies, antihistamines	Department of Education *Medication order to administer 'as-needed' medication at school*
Changes to dosage (e.g. from ½ to 1 tablet)	Ritalin	Written instructions from prescribing health practitioner (e.g. doctor)

1. To request that the school administer medication to a student

1) Complete Section A (page 2).
2) Provide the school with the medication in the original container with intact packaging.
3) Provide the written medical authorisation (e.g. completed pharmacy label, medication order, action plan) completed and signed by the prescribing health practitioner.
4) Make an appointment with the principal/delegate if:
   - the student requires medication as an emergency response;
   - you would like the student to self-administer their medication;
   - the student has complex health support needs or requires other support strategies; or
   - you have any concerns about the student's health which may affect their schooling.

2. To request a student self-administer their medication

1) Complete Section A (page 2) and Section B (page 3).

Uncontrolled copy. Refer to the Department of Education Policy and Procedure Register at https://ppr.qed.qld.gov.au/pp/administration-of-medications-in-schools-procedure to ensure you have the most current version of this document.

Queensland Government

Consent to administer medication

Privacy Statement
The Department of Education (DoE) is collecting this personal information for the purpose of enabling school staff to administer medication to the nominated student, or to support a student to self-administer their medication while at school or during school-related activities. This information will only be accessed by authorised departmental employees. In accordance with section 426 of the *Education (General Provisions) Act 2006* (regarding student's personal information) and the *Information Privacy Act 2009* (parent/carer's personal information) this information will not be disclosed to any other person or body unless DoE has been given permission or is required or authorised by law to disclose the information.

Section A: ***Complete the details below:***

NOTE: This form only collects information for one (1) medication. If more than one medication is required, please complete a separate form for each medication.

Student name		**Date of birth**	
Parent/carer name		**Phone number**	

- I consent to the following medication being administered (as per the instructions on the pharmacy label and/or any additional written instructions) to the student named above during school or school-related activities.
- I authorise school staff to contact the prescribing health practitioner or pharmacist (as listed on the medication's pharmacy label or in other relevant medical authorisation) for the purpose of seeking specific advice or clarification on the administration of this medication to this student.

Name of medication	

I confirm that the medication provided to the school (as listed above):

☐ is medically authorised *(e.g. has been prescribed by a doctor, dentist, optometrist or nurse practitioner)*
☐ is in the original dispensed container with intact packaging
☐ has the student's and doctor's names on the pharmacy label *(if there is no other written evidence of medical authorisation)*
☐ is current/in-date *(*The expiry date of the medication is _ _ /_ _ /_ _ _ _*)*.

The medication is required:		**If Yes to any questions, complete the following:**
(a) routinely (e.g. 11am every day)	☐ No ☐ Yes⇨	Administer at _ _: _ _ am/pm on the following days: *(circle the day/s required)* Monday Tuesday Wednesday Thursday Friday
(b) for a short time only (e.g. only for 2 weeks)	☐ No ☐ Yes⇨	Start date: _ _ /_ _ /_ _ _ _ End date: _ _ /_ _ /_ _ _ _
(c) to manage a health condition by following a current action plan or health plan	☐ No ☐ Yes⇨	Is the medication for: ☐ asthma ☐ anaphylaxis ☐ diabetes ☐ epilepsy ☐ cystic fibrosis ☐ other *(describe)*
(d) 'as needed' to treat minor or non-emergency symptoms	☐ No ☐ Yes⇨	☐ I understand that before the school administers this medication, if they are not aware of when this medication was most recently given to this student, I will be contacted to provide this information.

Has this student previously shown any side effects after taking this medication?	Yes ☐ No ☐

If **Yes**, describe: _____

Parent/carer/student signature		**Date**	

If the student is to self-administer this medication, also complete **Section B**
NOTE: Controlled drugs cannot be self-administered.

Uncontrolled copy. Refer to the Department of Education Policy and Procedure Register at https://ppr.qed.qld.gov.au/pp/administration-of-medications-in-schools-procedure to ensure you have the most current version of this document.

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Section B: *Details for student self-administration of medication:*			
In all cases and at any time, the principal/delegate may disallow student self-administration for health and/or safety reasons.			
Student name		**Date of birth**	

- I confirm that the student is confident, competent and can safely administer the right dose of their own medication at the right times.
- I confirm that the student can store their medication securely.
- I authorise school staff to contact the prescribing health practitioner, health team or pharmacist (as listed on the medication's pharmacy label or in other relevant medical authorisation) for the purpose of seeking specific advice or clarification on the administration of this medication by this student.

Health condition	
☐ Asthma - secondary school students only	☐ I approve for the student to self-administer their asthma medication. **NOTE:** The school will need a copy of the student's *Asthma Action Plan* if it varies from the standard asthma first aid response
Health condition	I seek approval from the principal/delegate for the student to self-administer:
☐ Asthma	☐ their asthma medication *(following a current action plan/health plan)*
☐ Anaphylaxis	☐ their adrenaline auto-injector *(following a current action plan/health plan)*
☐ Diabetes	☐ their medication *(following a current health plan)*
☐ Cystic fibrosis	☐ their medication *(following a current health plan)*
☐ Other _____	☐ their medication *(following a current health plan)*

Parent/carer/student signature		**Date**	

Uncontrolled copy. Refer to the Department of Education Policy and Procedure Register at https://ppr.qed.qld.gov.au/pp/administration-of-medications-in-schools-procedure to ensure you have the most current version of this document.

Queensland Government

Jindalee

OFFICE USE ONLY

INTERVIEW NOTES

Student Name:	Date: Time:	
Interviewed by:	Follow Up	
		GO
Present:		EALD
		HODI

CHECKLIST

Once you have completed this booklet, please use the following checklist to ensure you have provided all the necessary information:

APPLICATION FOR STUDENT ENROLMENT FORM - required

- ☐ Please note: Parent/Carer 1 listed on this enrolment application will be issued all financial invoices and statements
- ☐ Indigenous Status – page 4.
- ☐ Religious Instruction consent – page 6. (Please note: Religious Instruction is run by volunteers from a church of Christian based faith. Students who have consent will be in a classroom with the volunteer and supervised by a staff member. Non attending students will be in classrooms of their year level participating in activities run by year level classroom teachers).
- ☐ Emergency Contacts – page 6. Please provide at least ONE additional contact that is not listed as a Parent/Carer in case of an emergency.
- ☐ Medical Practitioner contact details if consent is given for contact – page 7.
- ☐ Court order details (if applicable) – page 7 & 8

CONSENT FORMS – required

- ☐ Student Enrolment Agreement (PAGE 11)- *The enrolment agreement sets out the responsibilities of the student, parents/carers and the school staff regarding the education of students enrolled at Jindalee State School. Further information is available in the 'Student Code of Conduct' which is located on our school website. **
- ☐ Student Resource Scheme (PAGE 13)– *The scheme is designed to offset the cost to you of the provision of educational resources associated with your student's education. For more information refer to the information sheet in this enrolment package.**
- ☐ Media Consent Form (PAGE 17-18) – *This consent form authorises the Department and the State to use the individual's personal information and copyright material. If you do not want your student to participate, please specify your limitations in Section 5.**
- ☐ ICT and Network Usage Agreement (PAGE 19) – *Please read through the agreements with your child and sign.**
- ☐ JAGS Oval Consent Form (PAGE 20) – *Please complete the permission form for your child to leave the school grounds for the express purpose of participating in school-based activities on the Jindalee JAGS oval during school hours.**

**This agreement shall remain in effect while the student is enrolled at Jindalee State School, unless revoked in writing.*

OTHER DOCUMENTS TO PROVIDE - if applicable

- ☐ Birth Certificate – required
- ☐ **TWO** 'Proof of Residency' documents – see page 1
- ☐ Action Plan/Doctor's Letter for any existing medical conditions
- ☐ Court Orders
- ☐ Specialist Reports

ADDITIONAL INFORMATION – Please complete only if applicable

- ☐ Additional Learning Information - (PAGE 22)
- ☐ Third Party Consent form - (PAGE 24-25)
- ☐ Consent to Administer Medication form - (PAGE 27-28)

Thank you for completing your enrolment application for Jindalee State School.

Please return ALL pages to our office or email enrolments@jindaleess.eq.edu.au.