



# BRAEVIEW SCHOOL

Learning | Striving | Growing Together

## General Consent Form

Schools often need to seek parent/caregiver permission to cover a wide range of activities and situations. This form will serve as your child's permissions throughout their schooling at Braeview School. We hope that by placing most of the potential situations on one sheet it will save time and paper. Please read, sign, date and return to the Front Office as soon as possible to support your child's teacher. Please sign and date each one that you give permission for and cross through any that you do not give permission for.

**Please note if for some reason you need to update/change any permissions on this form during your child's time at Braeview, it will be the Parent/caregivers responsibility to contact the front office for another form, which will be sent home to ensure we have accurate consent.**

**CHILD'S FULL NAME:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

**FULL NAME OF PARENT/CAREGIVER WHO COMPLETED THIS FORM AND RELATIONSHIP TO THE CHILD:** \_\_\_\_\_

### SCHOOL YARD SUPERVISION

I understand that the school yard is supervised from 8.30am – 3.30pm Monday, Wednesday Thursday and Friday 8.30-2.40pm on Tuesday.	SIGNED: _____
	DATE: _____

### PERMISSION TO BORROW LIBRARY BOOKS

I give permission for my child to borrow books from the library and I accept responsibility for any book damage or lost book/s by my child.	SIGNED: _____
	DATE: _____

### AMBULANCE

I understand that an ambulance may be obtained for my child in the case of an emergency and agree to pay any costs associated (this can be covered through your family ambulance cover, private health insurance or through seeking compensation through the Department for Education – (Front Office will provide information if needed).	SIGNED: _____
	DATE: _____

### SUNSCREEN

I give permission for staff to support my child to apply sunscreen	SIGNED: _____
	DATE: _____

### P/G CLASSIFIED MOVIE CONSENT

I give permission for my child to watch a P/G classified movie as part of the classroom program.	SIGNED: _____
	DATE: _____

### CONSENT FOR HEAD LICE CHECKS

The South Australian Health Commission recommends that everyone check their hair every week for head lice. Checking and treating children's hair is BY LAW, A PARENT'S RESPONSIBILITY. Sometimes schools offer to arrange head checks if there is a community outbreak of head lice.

I understand and accept that if my child is found to be infested they will be withdrawn from close contact with other children until collected for treatment by a parent or caregiver.	SIGNED: _____
	DATE: _____

I give permission for a staff member to check my child's hair for head lice. I understand any such check will be conducted sensitively.	SIGNED: _____
	DATE: _____

I will ensure my child does not attend Braeview School with untreated head lice. I will inform the school when my child has been treated with appropriate head lice treatments to address the infestation before returning to class.	SIGNED: _____
	DATE: _____

<b>CONSENT FORM FOR CHIEF EXECUTIVE APPROVED EARLY DISMISSALS</b>	
<p><b>As a parent I/We give my consent for them to be dismissed early under the following conditions:</b></p> <ul style="list-style-type: none"> <li>• up to 1 hour before the normal end of the school day no more than 4 times a year for the purpose of the end of school terms;</li> <li>• up to 1 hour before the normal end of the school day for the purpose of an annual school sports day;</li> <li>• up to 1 hour before the normal end of the school day each Tuesday for the purpose of teacher's PLC meetings</li> </ul> <p>Parents will be notified in advance (minimum 1 month) of the reason, time and date of the above early dismissals through the normal communication channels used between the school and parents, including, but not limited to, school newsletters and the schools website.</p> <p>For early dismissals relating to 'extreme heat' scenarios parents will be notified as soon as possible before students are dismissed.</p> <p><b>Agreement</b></p> <ul style="list-style-type: none"> <li>• I agree and acknowledge that my consent (if provided) will remain active/in place for the entire time my child is enrolled and attending at the school unless I withdraw it by notifying the principal (or delegate) either in writing or by telephone.</li> </ul>	<p>SIGNED:</p> <p>DATE:</p>

<b>CONSENT FORM FOR LOCAL WALKS/EXCURSION</b>	
<p><b>As a parent/legal guardian I give my consent for them to participate in local walks/excursions to areas within a 1 km radius from the school during the school year for educational purposes when no costs are incurred (e.g. walks to the park).</b></p> <p>Parents/legal guardians will be notified in advance of the local walk/excursion details (ie date, activity and times) via student diaries/notes.</p> <p>Consent forms for all other types of camps/excursions will be issued as they arise.</p> <p><b>Agreement</b></p> <ul style="list-style-type: none"> <li>• I agree to delegate my authority to supervising teachers/instructors. Such supervisors may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group and individually.</li> <li>• In the event of an accident or illness and contact with me is impracticable or impossible, I authorise the teacher-in-charge to arrange whatever medical treatment a registered medical practitioner considers necessary.</li> <li>• The information given is accurate to the best of my knowledge.</li> </ul> <p>*Any health care information provided is not intended to prevent your child participating unless specific medical advice warrants exclusion. The health care information you supply to the school/preschool will be treated confidentially. Such information is sought in order to protect and assist the student so the activity may be a safe and enjoyable experience. Please contact the teacher-in-charge if you wish to discuss any health support needs.</p>	<p>SIGNED:</p> <p>DATE:</p>

<b>MOBILE PHONES AND PERSONAL DEVICES</b>	
<p>Personal devices include: mobile phones, tablets, smart watches and laptops (non BYOD). I understand that students who bring a mobile phone or personal device to school:</p> <ul style="list-style-type: none"> <li>• Do so at their own risk ( the school accepts no responsibility for lost, stolen or damaged mobile phones).</li> <li>• Are required to give them to their classroom teacher (switched off) at the beginning of the day.</li> <li>• Can collect them at the end of the school day</li> <li>• Are not allowed to use their mobile phone/personal device while on school grounds between 8.30am and 3.10pm.</li> <li>• Are not to be used to make calls, send SMS messages, surf the internet and take photographs or any other application on school grounds.</li> <li>• If found accessing or using their phone/personal device during the school day they will be required to lodge the item at the front office at the beginning of the school day and collect it at the end of the day if they wish to continue bringing it to school</li> <li>• Will face disciplinary action as sanctioned by the Principal if using it inappropriately. The school has the legal right and responsibility to hold a student’s mobile phone/personal device to be handed to SA Police if there are any concerns re: inappropriate material or possible evidence of electronic abuse or harassment.</li> </ul>	<p>SIGNED:</p> <p>DATE:</p>
<b>CYBER-SAFETY</b>	
<p>I understand that Braeview School will:</p> <ul style="list-style-type: none"> <li>• Do its best to enhance learning through the safe use of ICTs. This includes working to restrict access to inappropriate, illegal or harmful material on the internet or on ICT equipment/devices at school or at school related activities.</li> <li>• Work with children and their families to encourage and develop an understanding of the importance of cyber-safety through education designed to complement and support the Use Agreement initiative. This includes providing children with strategies to keep themselves safe in a connected online world</li> <li>• Respond to any breaches in an appropriate manner</li> <li>• Welcome enquiries at any time from parents/caregivers/legal guardians or children about cyber-safety issues</li> </ul> <p>My responsibilities include:</p> <ul style="list-style-type: none"> <li>• Discussing the information about cyber-safety with my child and explaining why it is important</li> <li>• Supporting the school’s cyber-safety program by emphasising to my child the need to follow the cyber-safety strategies</li> <li>• Contacting the Principal or nominee to discuss any question I may have about cyber-safety and/or the Braeview ICT/Cyber-Safety agreement</li> <li>• I have read and understand the Braeview Cyber Safety Policy</li> </ul>	<p>SIGNED:</p> <p>DATE:</p>
<b>PASTORAL CARE WORKER</b>	
<p>DECD policies require that students must have written informed parental consent to receive ongoing individual, personal assistance from a Pastoral Care Worker.</p> <p>I understand that teachers retain over-riding duty of care for students. Therefore the Pastoral Care Worker is required to confidentially inform teaching staff of all matters related to duty of care and student learning, health and wellbeing and will ensure my child is aware of the scope and limits of privacy and confidentiality in any conversation at which a teacher is not present. I am aware that the Pastoral Care Worker is a mandated notifier in relation to child protection.</p>	
<p>I give consent for my student to seek and obtain individual personal assistance from the Pastoral Care Worker (including Christian content) at Braeview School.</p>	<p>SIGNED:</p> <p>DATE:</p>
<p>I give consent for my student to seek and obtain individual personal assistance from the Pastoral Care Worker (NOT including Christian content) at Braeview School.</p>	<p>SIGNED:</p> <p>DATE:</p>
<p>I do not give consent for my student to seek and obtain individual personal assistance from the Pastoral Care Worker at Braeview School.</p>	<p>SIGNED:</p> <p>DATE:</p>
<p>I give consent for my child to attend Christian Option Programs at Easter and/or Christmas.</p>	<p>SIGNED:</p> <p>DATE:</p>

<b>SEESAW</b>	
Seesaw is a digital portfolio where educators and children (with educator's supervision) can add photos, videos, drawings, texts, PDFs and more. Educators and children will use Seesaw to communicate information via the newsletter and share children's learning with families.	
<b>HOW DO I GET SEESAW?</b>	
You will receive an invitation to connect to Seesaw from your child's class teacher. Simply follow the instructions outline to download the application and scan your child's unique QR code. Please see staff if you need any help to do this.	
<b>WHAT CAN FAMILIES SEE?</b>	
Families can only view the work posted by the teacher in their own child's journal. Families will not see the work of anyone else in the group unless the Braeview School teacher has intentionally shared it (this may happen when there is a small or large group experience that we want to share with everyone).	
<b>WHO CONTROLS MY CHILD'S SEESAW JOURNAL?</b>	
The Braeview School teachers have complete control over the children's Seesaw journal including approving what is posted, approving parent's comments on the posts, and who is able to see the posts. Teachers will adhere to parent's permissions for each child to ensure your child's safety and wellbeing.	
<b>HOW MANY FAMILY MEMBERS CAN CONNECT TO ONE CHILD?</b>	
Up to 10 family members can download the code and connect, however we ask that you limit it to 2 parents/caregivers to ensure that the teachers can monitor and control the number of people who are viewing the photos and information. Teachers can check this and can remove people if you add more than 2 parents/caregivers. Please support us with this.	
I give permission for my child's image to be used on the Seesaw app where it will be posted on my child's individual journal and only the two parents/caregivers I nominate to view this will have access.	SIGNED:  DATE:
I give permission for my child's image to be used on the Seesaw app where at times it will be posted for the whole group to view for the purposes of sharing a group story, or communicating learning that every child has been involved in.	SIGNED:  DATE:
<b>PHOTOGRAPHS – See attached DfE form</b>	
<b>Permission to use image, video ,voice, and/or creative work of students and children</b>	
The official DfE consent form on the back of this form covers a wide variety of uses within Braeview School as well as within the Department for Education.	
In addition to signing the official DfE consent form we have also itemised the individual photo permissions below to ensure that we have a clear understanding of what you give permission to for your child. Please read carefully and sign and return.	
I give permission for other parents and visitors to photograph my child in group photos with their own school child, for their own use. <b>PLEASE NOTE: Parents and visitors are NOT to publish these photos on any form of social media WITHOUT personal permission from individual parents.</b>	SIGNED:  DATE:
I give permission for photographs of my child (with first names) to be used on the Braeview School Sport closed Facebook Page.	SIGNED:  DATE:
I give permission for photographs of my child (with first names) to be used on the Braeview School SAKG Kitchen/Garden closed Facebook Page.	SIGNED:  DATE:
<b>Office Use Only: Entered on EDSAS by:_____ Date:_____</b>	