KEILOR HEIGHTS PRIMARY SCHOOL ENROLMENT INFORMATION

Any questions marked with a marked with a ❖ symbol is asked as a requirement of the Commonwealth Government. All schools across Australia are required to collect the same information.

ELEGIBILITY TO ENROL IN A VICTORIAN GOVERNMENT SCHOOL

Please ensure you bring the following with you when submitting this enrolment form and photocopies will be made of all original documents.

- Original Birth Certificate/Passport/Visa Documentation
- Show Australian Citizenship (for parents born overseas)
- Original Immunisation Certificate
- Original proof of Residence eg: Rates or Utilities Notice

If you have any queries, please contact the office on 9336 1739.

Form to Enrol in a Victorian Government School

KEILOR HEIGHTS PRIMARY SCHOOL

Student Enrolment Information – 20____	OFFICE USE ONLY	CASES21 Student ID:

The information requested in this form is required for enrolment purposes. This information is collected to plan for and support the educational needs of your child.

This form should be completed by parents or carers who are responsible for enrolling their child. It is the responsibility of the person completing this form to consult with all other adults that need to be involved in the enrolment process. Parents or carers can co-sign the same form or complete separate forms if personal details are unable to be shared between them.

If required information is not provided or there is a dispute between parents or carers about a child's enrolment, the enrolling principal is required to consider the student's education and wellbeing when deciding whether to defer or accept the enrolment.

Only one enrolment form should be submitted per student. By completing and submitting this enrolment form, you are accepting a place for your child at the specified school (subject to any further checks required by the school).

All schools across Australia are expected to collect the same information. Questions marked with a ❖ are asked as a requirement of the Commonwealth Government to meet data collection, funding and reporting requirements under the Australian Education Regulations 2013.

STUDENT DETAILS

Surname:	
First Given Name:	
Second Given Name: *(if applicable)*	
Preferred First Name: *(if applicable)*	
❖ **Gender:** ☐ Male ☐ Female ☐ Self-described: _____	
Date of Birth: *(dd-mm-yyyy)* ____ / ____ / _____	**Student Mobile Number:** *(if applicable)*

Intended start date:

☐ Day 1, Term 1 ☐ Other: *(dd-mm-yyyy)* _____ / _____ / _____

Which year are you seeking to enrol this student?

☐ Foundation ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ Ungraded

Student's Permanent Residence

Your child's permanent residence is the address where they spend the majority of their days during the school week. If they spend an equal amount of time at two addresses, both are considered their permanent address and your child will be entitled to enrol in the designated neighbourhood school for either address.

The school may make enquiries to verify the information provided, such as checking the electoral roll at an Australian Electoral Commission office or the Victorian Electoral Commission head office; checking with a real estate agent; or checking whether there are any regulations/codes limiting the number of people living at one residence, for example if a rental property is a studio or one bedroom unit.

No. & Street Address:	
Suburb:	
State:	**Postcode:**

How often does this student live at this address?		
☐ Always	☐ Mostly	☐ Balanced (50%)
If the student lives at another address during the school week, please provide further details including the address, who they reside with and how many days a week the student lives there:		

Siblings

A sibling is defined broadly and can include step-siblings and students residing together as part of a multiple family cohabitation or out-of-home-care arrangements, including foster care, kinship care, permanent care and residential care.

Does the student have any siblings at this school? ☐ Yes ☐ No *(move to next section)*

	Name	Current Year Level	Reside at same residential address as the student
1			☐ Yes ☐ No ☐ Sometimes
2			☐ Yes ☐ No ☐ Sometimes
3			☐ Yes ☐ No ☐ Sometimes
4			☐ Yes ☐ No ☐ Sometimes

PARENT/CARER DETAILS

Enrolling Adult 1

Title	
First Given Name	
Surname	
Gender	☐ Male ☐ Female ☐ Self-described: _____

Adult 1 Relationship to student:

☐ Parent ☐ Step Parent
☐ Host Family ☐ Relative
☐ Self (adult student / mature minor) ☐ Friend
☐ Foster Parent ☐ Other:_____

Student lives with Adult 1:

☐ Always ☐ Mostly
☐ Balanced (50%) ☐ Occasionally

No. & Street Address:	
Suburb:	
State:	**Postcode**

Enrolling Adult 2

Title	
First Given Name	
Surname	
Gender	☐ Male ☐ Female ☐ Self-described: _____

Adult 2 Relationship to student:

☐ Parent ☐ Relative
☐ Host Family ☐ Friend
☐ Foster Parent ☐ Other:_____
☐ Step Parent

Student lives with Adult 2:

☐ Always ☐ Mostly
☐ Balanced (50%) ☐ Occasionally

Address is the same as Enrolling Adult 1	☐ Yes ☐ No (complete below)
No. & Street Address:	
Suburb:	
State:	**Postcode**

Adult 1 Job Title:
Adult 1 Employer:

Adult 2 Job Title:
Adult 2 Employer:

In which country was Adult 1 born?

☐ Australia ☐ Other (please specify):_____

In which country was Adult 2 born?

☐ Australia ☐ Other (please specify):_____

❖ Does Adult 1 speak a language other than English at home?

☐ No, English only

☐ Yes (please specify): _____

Please indicate any additional languages spoken by Adult 1:	
Is an interpreter required?	☐ Yes ☐ No

❖ Does Adult 2 speak a language other than English at home?

☐ No, English only

☐ Yes (please specify): _____

Please indicate any additional languages spoken by Adult 2:	
Is an interpreter required?	☐ Yes ☐ No

❖ What is the highest year of primary or secondary school that Adult 1 has completed?

☐ Year 12 or equivalent ☐ Year 11 or equivalent

☐ Year 10 or equivalent ☐ Year 9 or equivalent or below / no schooling

❖ What is the level of the highest qualification that Adult 1 has completed?

☐ Bachelor degree or above ☐ Advanced diploma / Diploma

☐ Certificate I to IV (including trade certificate) ☐ No non-school qualification

❖ What is the occupation group of Adult 1?

Please select the appropriate current parental occupation group from the attached list at the end of the document.

- If the person is not currently in paid work but has had a job in the last 12 months, or has retired in the last 12 months, please use their last occupation to select from the attached list.
- If the person has not been in paid work for the last 12 months, enter 'N'.

❖ What is the highest year of primary or secondary school that Adult 2 has completed?

☐ Year 12 or equivalent ☐ Year 11 or equivalent

☐ Year 10 or equivalent ☐ Year 9 or equivalent or below / no schooling

❖ What is the level of the highest qualification that Adult 2 has completed?

☐ Bachelor degree or above ☐ Advanced diploma / Diploma

☐ Certificate I to IV (including trade certificate) ☐ No non-school qualification

❖ What is the occupation group of Adult 2?

Please select the appropriate current parental occupation group from the attached list at the end of the document.

- If the person is not currently in paid work but has had a job in the last 12 months, or has retired in the last 12 months, please use their last occupation to select from the attached list.
- If the person has not been in paid work for the last 12 months, enter 'N'.

What is the main language spoken between the student and adult at home?	
Preferred language of communications:	
Is Adult 1 interested in being involved in school group participation activities? *(e.g., School Council, excursions)*	☐ Yes ☐ No

What is the main language spoken between the student and adult at home?	
Preferred language of communications:	
Is Adult 2 interested in being involved in school group participation activities? *(e.g., School Council, excursions)*	☐ Yes ☐ No

Can we contact Adult 1 during school hours?	☐ Yes	☐ No
Is Adult 1 usually home during school hours?	☐ Yes	☐ No
Home Phone:		
Work Phone:		
Mobile:		
SMS Notifications:	☐ Yes	☐ No
Email Address:		
Email Notifications:	☐ Yes	☐ No
Adult 1's preferred method of contact: *(Email shall be used for communication that cannot be sent via phone)*	☐ Mobile ☐ Home Phone	☐ Email ☐ Work Phone
Specify any other special conditions or times related to contact?		

Can we contact Adult 2 during school hours?	☐ Yes	☐ No
Is Adult 2 usually home during school hours?	☐ Yes	☐ No
Home Phone:		
Work Phone:		
Mobile:		
SMS Notifications:	☐ Yes	☐ No
Email Address:		
Email Notifications:	☐ Yes	☐ No
Adult 2's preferred method of contact: *(Email shall be used for communication that cannot be sent via phone)*	☐ Mobile ☐ Home Phone	☐ Email ☐ Work Phone
Specify any other special conditions or times related to contact?		

Emergency Contacts

Please provide emergency contacts in the event that the enrolling parents/carers are unavailable. Please ensure those listed as emergency contacts are aware that their information has been provided for this purpose.

	Name	**Relationship** *Neighbour, Relative, Friend or Other (please specify)*	**Telephone Contact**	**Language Spoken** *Write E for English*
1				
2				
3				
4				

Billing Details

You are not required to make payments or voluntary financial contributions to your school. Schools may request payments for extra-curricular items and activities. For more information, please refer to www.vic.gov.au/school-costs-and-fees.

Send bills to: *(select one)*	☐ Adult 1	☐ Adult 2	☐ Another person / address* (complete details below)
Name to be used for all billing correspondence:			
No. & Street or PO Box			
Suburb:			
State:		**Postcode:**	
Billing Email:			

* Note: If you would like to send bills to another person / address, please ensure Additional Parent/Carer details are completed on pages 13-15.

Correspondence Details

Send correspondence addressed to: *(select one)*	☐ Adult 1	☐ Adult 2	☐ Both Adults	☐ Neither

Additional Parents/Carers

Are there additional parents/carers in the student's life?	☐ Yes (provide details below)	☐ No (move to next section)
Name of Adult 3:		
Name of Adult 4:		

If yes, please complete the Adult 3 and/or Adult 4 sections as attachments to this form on pages 13-15. If required, you may request a separate form for additional parents/carers from the school. The separate form allows for the capture of four further parents/carers.

STUDENT DEMOGRAPHICS

❖ In which country was the student born?

☐ Australia ☐ Other *(please specify)*: _____

If born overseas, on what date did the student arrive in Australia? *(dd-mm-yyyy)* ____ / ____ / _____

What is the student's residency status? *

☐ Australian citizen – holds Australian Passport ☐ Permanent Resident (provide visa details below)

☐ Australian citizen – eligible for Australian Passport ☐ Temporary Resident (provide visa details below)

☐ New Zealand citizen

Visa Sub Class:	**Visa Expiry Date:** *(dd-mm-yyyy)* ____ / ____ / _____
Visa Statistical Code: *(Required for some sub-classes)*	

* Note: An Australian birth certificate does not guarantee Australian residency or citizenship. Further information is available at www.passports.gov.au/getting-passport-how-it-works/documents-you-need/citizenship

Does the student hold a Bridging Visa?	☐ Yes *(provide further detail below)*	☐ No
If Yes, what was the student's previous visa?		
If Yes, what visa has the student applied for?		

International Student ID*: *(Not required for exchange students)*

* Note: If you are unsure of your International Student ID, please contact the International Education Division via phone (03 9084 8497) or email (international@education.vic.gov.au).

Does the student speak English?	☐ Yes	☐ No

❖ Does the student speak a language other than English at home?

☐ No, English only

☐ Yes (please specify the main language spoken at home): _____

❖ Is the student of Aboriginal or Torres Strait Islander origin?

☐ No ☐ Yes, Aboriginal

☐ Yes, Torres Strait Islander ☐ Yes, Both Aboriginal & Torres Strait Islander

Is the student a young carer (providing support/care for other family member/s)? *	☐ Yes	☐ No

* A young carer is a young person under 25 years of age who provides, or intends to provide care, assistance, or support to a family member with a mental illness, physical illness, disability, chronic illness, or who is aged or has an addiction.

What are the student's living arrangements?

- ☐ Student lives with parents/carers together at the same residence
- ☐ Student lives with each parent/carer at different times
- ☐ Student lives with one parent/carer only
- ☐ State Arranged Out of Home Care*
- ☐ Informal care arrangement#
- ☐ Student is independent
- ☐ Homeless

If the student has a Case Manager, please provide their contact details below:

* Students who live in court ordered alternative care arrangements away from their parents. These court ordered care arrangements include living with relatives or friends (kinship care), living with non-relative families (foster care or adolescent community placements) and living in residential care units.

If the student is living in an informal care arrangement, please contact the school for an Informal Carer's Statutory Declaration, which must be completed.

If there are any **court orders** about the child, please provide copies of those orders to the school with this form.

How will the student primarily travel to and from school?

☐ Walking ☐ School Bus ☐ Train ☐ Driven by parent/carer ☐ Taxi / Ride Share

☐ Bicycle ☐ Public Bus ☐ Tram ☐ Self-Driven ☐ Other: _____

If the student catches public transport to school, what station/stop does their journey commence:

If the student drives themself to school, what is their Car Registration Number:

Students residing in rural and regional Victoria or attending special schools may be entitled to receive travel assistance. Travel assistance may be in the form of access to a school bus service or financial support through a conveyance allowance to assist with the cost of travel. Information on eligibility and the application process can be obtained from the school.

SCHOOL DETAILS

Are you seeking to enrol the student at this school full-time? ☐ Yes *(move to next section)* ☐ No

If No, how many days a week would the student be attending this school?

If No, provide reason you are seeking part-time enrolment:

If No, provide details for other schools:

Other school name:	***Days / week:***	***Has enrolment been accepted?***	☐ Yes ☐ No
Other school name:	***Days / week:***	***Has enrolment been accepted?***	☐ Yes ☐ No

Previous Education – Students Enrolling in Foundation for the First Time

Is the student attending a funded kindergarten program* in the year before Foundation? ☐ Yes ☐ No

Name of kindergarten or early childhood service:

* Note: A kindergarten program that is funded and approved by the Victorian Government, has a play-based learning program, and is delivered by a qualified teacher. Funded kindergarten programs can be found at www.education.vic.gov.au/findaservice

Previous Education – Other

Has the student previously been enrolled at another school?

☐ Yes, in Victoria – Government School ☐ Yes, in Victoria – Catholic or Independent School

☐ Yes, interstate ☐ Yes, overseas ☐ No *(move to next section)*

If Yes, name of last school attended:	
If Yes, location of last school attended: *(suburb/town/state/country)*	
If Yes, date of attendance: *(dd-mm-yyyy)*	_____ / _____ / _____ to _____ / _____ / _____
If Yes, year levels of previous education:	

If the student studied overseas, what age did the student first start school?
What was the language of the student's previous education?

Period of interruption to education: *(months/years)*	**Is the student repeating a year level?** ☐ Yes ☐ No

STUDENT MEDICAL DETAILS

Schools require the health information requested in this section to plan for and support the health and wellbeing needs of students.

Please note: If there is a situation or incident which requires first aid to be administered to your child, school staff will administer first aid that is reasonably necessary and appropriate to their level of training. School staff will also seek emergency medical attention for your child if it is considered reasonably necessary. Any costs associated with student injury rest with parents/carers unless the Department of Education is liable in negligence (liability is not automatic). In the event that your child needs medical attention, school staff will contact you as soon as practically possible.

Medical Conditions

Does the student have an allergy? If yes, please provide the school with an ASCIA Action Plan for Allergies (available at: www.allergy.org.au/hp/ascia-plans-action-and-treatment#r2a)	☐ Yes	☐ No
Is the student at risk of anaphylaxis? If yes, please provide the school with an ASCIA Action Plan for Anaphylaxis (available at: www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis)	☐ Yes	☐ No

Does the student have asthma?	☐ Yes	☐ No
Has a current Asthma Action Plan been provided to School? If No, please provide an Asthma Action Plan to the School (available at: www.asthma.org.au/treatment-diagnosis/asthma-action-plan/)	☐ Yes	☐ No

Does the student have any other medical condition or other relevant medical assessment that the school needs to know about? If Yes, please ask the school for the appropriate medical advice form, to be completed by the treating medical practitioner and returned to school.	☐ Yes	☐ No
If Yes to any of the above, please specify:		

Medication

Does the student take medication?	☐ Yes	☐ No
Is the medication required during school hours? If Yes, please ask the school for a Medication Authority Form, to be completed by the treating medical practitioner and returned to school	☐ Yes	☐ No
Name of medications taken:		

Student Doctor

Doctor's Name:	
Medical Centre:	
Street Address:	
Suburb:	**Postcode:**
State:	**Telephone Number:**

ADDITIONAL LEARNING AND SUPPORT NEEDS

The Department of Education recognises that adjustments may be required for students with additional needs, including students with disability, so that they can participate at school. School personnel and parents or carers work together to identify the adjustments that may be needed to meet the student's learning and support needs.

Does the student have additional needs and require support for learning? ☐ Yes ☐ No

Does the student have additional needs in any of the following areas?	***Hearing:***	☐ Yes *(please specify)*: _____
	Vision:	☐ Yes *(please specify)*: _____
	Speech/Language:	☐ Yes *(please specify)*: _____
	Physical:	☐ Yes *(please specify)*: _____
	Cognitive/Learning:	☐ Yes *(please specify)*: _____
	Social/Emotional:	☐ Yes *(please specify)*: _____

Has the student had a disability assessment before?	☐ No ☐ Yes *(specify outcome)*: _____
Has the student received individualised disability funding before?	☐ No ☐ Yes *(please specify)*: _____
Has any previous education provider prepared a documented plan to support the student's additional learning needs?	☐ No ☐ Yes *(provide details)*: _____

Please indicate any adjustments that may assist the student to participate at school:

Allied Health Support

Has the student previously accessed support from an allied health professional?		
Occupational therapy: ☐ Yes ☐ No **Name and contact details:**	**Exercise physiology** ☐ Yes ☐ No **Name and contact details:**	**Speech pathology** ☐ Yes ☐ No **Name and contact details:**
Physiotherapy ☐ Yes ☐ No **Name and contact details:**	**Behaviour support** ☐ Yes ☐ No **Name and contact details:**	**Other** ☐ Yes ☐ No **Name and contact details:**

STUDENT SAFETY, ACCESS AND SPECIAL CIRCUMSTANCES

Student Risk

The Department of Education has a responsibility to assess and manage risk of harm to its staff and students. By providing information about your child, you will help facilitate their transition to school and ensure their safety. This may involve preparing a behaviour management plan or other appropriate strategies to meet the particular needs of the student.

To your knowledge, is there anything in the student's history or circumstances (including medical history not already provided) which might pose a risk of any type to this student, other students, or staff at this school?	
☐ Yes	☐ No *(move to the next section)*
If Yes, please provide further detail:	

Court Orders and Other Care Arrangements *(previously referred to as an Access Alert)*

Is there an intervention order, parenting order or any other court order impacting the student?	
☐ Yes	☐ No *(move to the next section)*

If Yes, then complete the following questions and **present a current copy of the document to the school.**

Court Order or other access document type:	☐ Family Law Order / Parenting Order	☐ Parenting Plan / Agreement	☐ Intervention Order
	☐ Child Protection Order	☐ DFFH Authorisation	☐ Other: _____
Please provide further details of the Court Order or other access documents, and any other safety concerns:			
End Date (if applicable): *(dd-mm-yyyy)*			

Activity Restrictions and Considerations

Are there any activities (organised by the school and/or third parties) that the student cannot participate in?

☐ Yes ☐ No *(move to the next section)*

If Yes, please provide further detail: (e.g. sport, excursions)

Privacy Statement
The personal and health information collected in this form, and any attachments, is required for enrolment at all Victorian Government Schools. The information is collected to ensure accurate enrolment, and to plan for and support the educational needs of students. The information will be managed securely and accessed only by staff, on a need-to-know basis, and in accordance with the Department of Education Schools' Privacy Policy which applies to all government schools (available at: www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx) or where mandated or allowed by law.

Please also refer to the Victorian Government School Privacy Collection Notice for details on handling of personal and health information in schools: www.education.vic.gov.au/Pages/Schools'-Privacy-Collection-Notice.aspx

DECLARATION

Thank you for completing this Student Enrolment form. The information provided is required to enable staff to properly enrol your child at our school as such it is important that it is accurate and up to date.

I/We confirm that:

- **I am/We are the person/people named as completing this form.**
- **The information in this form is true and correct.**
- **I/We agree to authorise this form by electronic means with an electronic signature.**

Signature of Enrolling Adult: _____ Date: _____ / _____ / _____

Signature of Enrolling Adult (if applicable): _____ Date: _____ / _____ / _____

Please select the category that best describes who has signed and completed this form. This will assist the school with the enrolment process.

☐ Both parents/carers have completed and signed this form.

☐ Parents/carers are completing separate forms (schools can provide additional forms on request).

☐ One parent has completed and signed this form on behalf of both parents. Contact details for the other parent have been provided in the form for the school's use as required.

☐ One parent has completed and signed this form and the contact details for the other parent are unknown to the enrolling parent/carer and not provided.

☐ There is only one parent/carer with legal responsibility for the child and that person has completed and signed this form.

☐ Other, please specify: (for instance, where the contact details for the other parent are known but it is not appropriate or safe to contact them) _____

If there are any court orders about the child, please provide copies of those orders to the school with this form.

WHO CAN SIGN THIS FORM?

- **A person with parental responsibility:** a parent of a child under 18 years of age, subject to relevant court orders (including parenting orders made under the *Family Law Act 1975* and protection orders made under the *Children, Youth and Families Act 2005* by the Children's Court, or other person granted parental responsibility under a relevant court order).
- **A carer formally authorised by Child Protection to enrol the student:** the Department of Families, Fairness and Housing (DFFH) can issue a written authorisation to the carer of a child in out of home care to make decisions about the child. In some circumstances this will include specific authorisation to enrol the child at school.
- **Informal carer**: an Informal Carer is a relative or other responsible adult with whom the child lives, and who has day to day care of the child. The informal carer should provide an Informal Carer Statutory Declaration to confirm their status as an informal carer. A copy of this statutory declaration can be obtained from www.education.vic.gov.au/PAL/informal-carer-statutory-declaration-template.pdf
- **Students living independently:** If the student is an adult or a mature minor for the purpose of enrolment and they live independently. These students will need to be considered in accordance with the www.education.vic.gov.au/pal/decision-making-responsibilities-students/policy policy.
- **Adult Students:** a student 18 years of age or older is considered an adult and can sign their own consent form.

ATTACHMENT 1 – PARENTAL OCCUPATION GROUP CODES

The codes outlined below are to be used when providing family occupation details for enrolled students. Please indicate your current occupation – not your qualification. This information is used for determining funding allocations to schools.

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

Senior Executive / Manager / Department Head in industry, commerce, media or other large organisation
Public Service Manager (Section head or above), regional director, health / education / police / fire services administrator
Other administrator (school principal, faculty head / dean, library / museum / gallery director, research facility director)
Defence Forces Commissioned Officer
Professionals - generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; identify, treat, and advise on problems; and teach others:

- 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 B: Other business managers, arts/media/sportspersons 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, proofreader, sportsman/woman, 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 C: Tradespeople, clerks and skilled office, sales and service staff

Tradespeople generally have completed a 4-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 D: 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's 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, farm hand, 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

Photographing, Filming and Recording Students at Keilor Heights Primary School

Consent Form

There are many occasions during the school year when staff photograph, film or record students participating in school activities or events. We do this for many reasons including to celebrate student participation and achievement, showcase learning programs, document a student's learning journey/camps/excursions/sports events etc, communicate with our parents and school community in newsletters and on school website, Instagram & Facebook.

Our **Photographing, Filming and Recording Students Policy** https://kheights.vic.edu.au/wp-content/uploads/2025/11/Photographing-filming-recording-students-policy-2025.pdf, describes how we will collect and use photographs, video and recordings (images) of students. The policy also explains when parent/carer consent is required and how it can be provided and withdrawn.

Please note there are uses of images that do not require consent. These include curriculum-based activities (i.e. class work), identity management, managing behavioural and safety incidents, to support a student's health and wellbeing, and to provide individual feedback or communication to a student, their parents/carers and/or school staff. If you have any concerns about the use of photographs in our school, for example, due to safety or cultural reasons, please contact our Principal, Victoria Graham on 9336 1739 or keilor.heights.ps@education.vic.gov.au

This **Consent Form** describes:

- situations where consent is required and seeks that consent
- how personal information will be handled in regard to privacy law
- ownership and reproduction of images

If you would like to withdraw or change your consent at any time, you must notify us via email keilor.heights.ps@education.vic.gov.au If consent is withdrawn verbally, we will require a written record of this. Please note, it may not be possible for the school to amend past publications or to withdraw images that are already in the public domain.

We will provide an annual reminder to parents about our **Photographing, Filming and Recording Students Policy** via the school newsletter and Compass. We will also notify parents when implementing software that may include photos of students, giving parents an opportunity to discuss any concerns or preferences.

This consent form applies to images of students that are collected and used by our school. We ask that any parents/carers or other members of our school community photographing, filming or recording students at school events (e.g. concerts, sports events etc) do so in a respectful and safe manner and that images of students are not publicly posted (e.g. to a social media account) without the permission of the relevant parent/carer.

If you do not understand any aspect of this consent form, or you would like to talk about any concerns you have, please contact our school on 9336 1739 or keilor.heights.ps@education.vic.gov.au

Privacy

Photographs, video and recordings (**images**) in which your child is identifiable are considered 'personal information' under Victorian privacy law. This means that any images of your child taken by the school may be a collection of your child's personal information. The school is part of the Department of Education (**the department**). The department values the privacy of every person and must comply with the *Privacy and Data Protection Act 2014* (Vic) when collecting and managing all personal information. For further

information refer to the **Schools' Privacy Policy** (http://www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx).

Ownership and reproduction

Copyright in the images will be wholly owned by the school. This means that the school may use the images in the ways described in this form without notifying, acknowledging or compensating you or your child.

Consent for use of images

Our school uses images in a number of ways. Please read the categories below, then indicate your opt-in consent by using the tick boxes at the bottom of this form.

Use of images within the physical school environment

If you consent, photographs, video or recordings of your child may be used by our school within the school environment in any of the following way:

- for display in school classrooms

Use of images within the school community

If you consent, photographs, video or recordings of your child may be used by our school within the school community in any of the following ways:

- in the school's online communication, learning and teaching tools (e.g. classroom blogs or apps that can only be accessed by students, parents/carers and school staff with passwords.)
- in the school magazine or yearbook or digital sign

Use of images beyond the school community/publicly

If you consent, photographs, video or recordings of your child may be used in publications that are accessible to the public, including:

- on the school's website, including in the school newsletter which is publicly available on the website
- on the school's social media accounts (Facebook/Instagram) –We will notify you individually if we are considering using images of your child for specific advertising or promotional purposes.

Your consent

I have read this form and I consent to Keilor Heights Primary School collecting photos, video or recordings of my child during their time at the school, and using these photos, video or recordings in the following ways.

Indicate your consent for the three options by using the tick boxes.

✓ I consent to the use of images of my child **within the physical school environment**

☐ I consent to the use of images of my child **within the school community**

☐ I consent to the use of images of my child **beyond the school community/publicly, i.e. the school's website and social media accounts**

Name of student:	
Name of parent/carer:	
Signature:	
Date:	

Further information about how Keilor Heights Primary School collects and uses photos, video and recordings of students is available in our Photographing, Filming and Recording Students Policy https://kheights.vic.edu.au/wp-content/uploads/2025/11/Photographing-filming-recording-students-policy-2025.pdf, including use of images that do not require consent, e.g. to fulfill legal obligations or for identification purposes.

If you do not return this form to the school, we will assume that you do not consent to the optional uses as described above.

Name:_____ Year Level:_____

HEAD LICE CHECK PERMISSION

The school will arrange head lice inspections throughout the year. These will be conducted by a local council nurse or trained school staff. The management of head lice infestation works best when all children are involved in the screening program. Before the inspections are conducted staff will explain to the student what is being done and why. It will be emphasized to students that this can be a sensitive issue and the school is committed to maintaining student confidentiality and avoiding stigmatization. In cases where live head lice are found the student is required by law to be sent home, they will be given a written notice with advice about treatment.

Please note that the law requires that when a child has head lice they should not return the school until appropriate treatment has been administered.

I give permission for my child to participate in the school head lice inspection program.

Signature of Parent/Guardian_____ Date: ____/____/____

LOCAL EXCURSION

During your child's stay at Keilor Heights Primary School, their class may visit places of interest in the local area; eg. Local library, local park, etc. The children will walk to these venues under the supervision of the class teacher. There will be no cost involved.

- I give permission for my child to attend any local excursions organized by the staff at Keilor Heights Primary School in the local area at no cost.
- I authorize the teacher in charge of the program to consent where it is impracticable to communicate with me, to my child receiving such medical or surgical treatment as deemed necessary.

Signature of Parent/Guardian:_____ Date:____/____/ ____

PERMISSION TO PARTICIPATE IN CLASSES THAT INVOLVE CONTENT CLASSIFIED AS PG (PARENTAL GUIDANCE)

As part of any given unit of work, your child's teacher may deem it appropriate and educationally beneficial for students to view or listen to audio visual content that has been classified as PG (Parental Guidance). Your child can only view or listen to this content with your permission.

I give permission for my child to view audio visual content with a PG classification.

Signature of Parent/Guardian:_____ Date:____/____/____

ACCEPTABLE USE POLICY - INTERNET & SPECIFIC PROGRAMS

PREP - YEAR 6

I agree to allow my child to access the internet within areas specified that:

- Have been previously viewed and used by a staff member at K.H.P.S.
- Have been quality assured and available through the Department of Education and Training's website (the department has embedded security on URL's preventing students accessing inappropriate sites)
- Specific educational programs approved by the school
- Apps

I understand that all e-mail correspondence will be under the supervision of a member of the school staff.

I understand that adequate supervision will always be available when my child is using the internet for class work.

Signature of Parent/Guardian:_____ Date:____/____/____