

Transition Enrolment Attachment

If you are enrolling your child in **transition**, please answer the following questions. Your answers will help inform the Department of Education and Training to provide early childhood services (preschool and child care) that suit the needs of parents and families.

Student surname:	
Student first name:	
Date of birth:	
Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female

1. Approximately how long has your child resided in this community?	<input type="checkbox"/> Less than 6 months	<input type="checkbox"/> 6 months to 1 year		
	<input type="checkbox"/> 1 year to 3 years	<input type="checkbox"/> More than 3 years		
2. Over the past 12 months, was your child in non-parental care on a regular basis and/or attended any other educational programs/classes?	<input type="checkbox"/> Yes - please go to question 3 <input type="checkbox"/> No - please go straight to question 6			
3. What type of care did your child receive?	No	Yes Full-time	Yes Part-time	
a) Day care centre - with preschool program	Name:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Day care centre - without preschool program	Name:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Day care centre - not sure about preschool program	Name:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Preschool - location (suburb/community): _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Family day care		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Grandparent		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Other relative		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Nanny		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Other person (includes friend or neighbour)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) Other - please specify: _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Did your child attend a language program? Please specify: _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Did your child attend religious classes? Please specify: _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. You answered No to question 2 - please tick the reason that applies to your situation:		Tick if applicable		
a) I preferred my child to stay at home in parental care		<input type="checkbox"/>		
b) No preschool/centre available in my suburb/community		<input type="checkbox"/>		
c) No vacancy in the preschool/centre		<input type="checkbox"/>		
d) No transport available (bus/car) to the preschool/centre		<input type="checkbox"/>		
e) The preschool/centre was not affordable		<input type="checkbox"/>		
f) Other reason - please specify: _____		<input type="checkbox"/>		

Office use only	
Student UPN: (please use student tracker)	
Year:	
Form:	
Anticipated start date:	
Enrolment status:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time FTE:

Student Enrolment Form

Information and Privacy

The Department of Education and Training is committed to providing Northern Territory students with quality education services. The department needs to ask for personal information from students, parents and guardians so it can plan, provide and report on its services, and to monitor compliance under the *Education Act*. Personal information will only be disclosed for these purposes as permitted by the *Information Act*. The *Privacy Statement* attached is for your information. Please take the time to read this as it outlines in greater detail the use and disclosure of the information that you provide.

If you need help completing this form, including translation services, please contact your school.

School name:		
Has the student ever attended an NT school?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
What was the last school the student attended?	School name:	
	State/Territory:	Country: (if not Australia)
	Year/grade/level attained:	Date of leaving: / /
Is this student residing in the NT due to a Defence Force posting?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Proof of identity attached (e.g. birth certificate, Medicare card, health care card)	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Section 1 Student Details

Surname:		
Legal surname on birth certificate: (if different from above)		
Previous surname: (if applicable)		
1st name: (given name)		
2nd name: (middle name)		
3rd name: (if applicable)		
Preferred first name:		
Has the student been known by any other names? (if not listed above)	Other surname/s:	Other first name/s:

Date of birth:		
Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Tribal grouping/clan name: (if applicable)		
Skin name: (if applicable)		
Student's residential address:		
Suburb/town/community:		Postcode:
Student's postal address: (if different from above)		
Suburb/town/community:		Postcode:

Senior secondary students only	
Student's contact details:	Phone:
	Mobile:
	Email:
Student's car registration number: (if applicable)	
Is the student independent? (i.e. living without a parent/guardian)	<input type="checkbox"/> Yes (If yes, all correspondence will be sent to the student). <input type="checkbox"/> No (If no, all correspondence will be sent to the parent/guardian).

Section 2 Additional Student Information	
Is the student of Aboriginal or Torres Strait Islander origin?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander <input type="checkbox"/> Yes, both Aboriginal and Torres Strait Islander
Does the student speak a language other than English at home? (If more than one language, indicate the one that is spoken most often)	<input type="checkbox"/> No, English only <input type="checkbox"/> Yes, other – please specify: <hr/>
Is the student an Australian citizen or permanent resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, what is the visa subclass number: (e.g. 457, 676) If you have any questions about the visa subclass, contact the department's International Services Branch on 8901 4905.	<hr/> <input type="checkbox"/> Copy of visa attached?
If born overseas, on what date did the student arrive in Australia?	/ /
In which country was the student born?	<input type="checkbox"/> Australia <input type="checkbox"/> Other – please specify: <hr/>

Section 3 Special Family Circumstances

Special family circumstances include a single parent, dual custody, foster care, court orders, access restrictions etc. Please provide details of the circumstances.

Are supporting legal documents attached? Yes No

Section 4 Parent/Guardian Information

If you are an independent student (living without a parent or guardian) please go straight to Section 7

	Parent/guardian 1	Parent/guardian 2
Title: (Mr/Ms/Mrs/Miss)		
Surname:		
First name:		
Middle name:		
Relationship to student: (e.g. father, grandmother)		
Responsible for parenting*	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lives with student*	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Receive accounts* (e.g. fees)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Receive reports etc*	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Contact this person in an emergency?*	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No (If all the No boxes above are ticked, please ensure Section 3 is completed.)
Home phone:		
Other phone:		
Mobile:		
Email:		
Residential address:		
Suburb/town/community:		
Postcode:		
Postal address: (if different from above)		
Suburb/town/community:		
Postcode:		

*Tick all boxes that apply

Section 5 Parent/Guardian Background Information

The information requested in this section is collected for national reporting purposes. All parents across Australia are being asked to provide this optional information. It will be used to assist school education authorities in ensuring funding and teaching resources are appropriately allocated to Territory schools as part of the *National Education Agreement*.

Does the parent/guardian speak a language other than English at home?
If more than one language, indicate the one that is spoken most often.

Parent/guardian 1	Parent/guardian 2
<input type="checkbox"/> No, English only <input type="checkbox"/> Yes, other – please specify <hr/>	<input type="checkbox"/> No, English only <input type="checkbox"/> Yes, other – please specify <hr/>

What is the **highest** year of primary or secondary school the parent/guardian has completed?
For persons who have never attended school, mark Year 9 or equivalent or below.

Parent/guardian 1	Parent/guardian 2
<input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent or below	<input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent or below

What is the level of the **highest** qualification the parent/guardian has completed?

Parent/guardian 1	Parent/guardian 2
<input type="checkbox"/> Bachelor degree or above <input type="checkbox"/> Advanced diploma/Diploma <input type="checkbox"/> Certificate I to IV (including trade certificate) <input type="checkbox"/> No non-school qualification	<input type="checkbox"/> Bachelor degree or above <input type="checkbox"/> Advanced diploma/Diploma <input type="checkbox"/> Certificate I to IV (including trade certificate) <input type="checkbox"/> No non-school qualification

What is the occupation group of the parent/guardian?

Please select the appropriate parental occupation group below (for more details refer to Appendix 2).
If the person is not currently in paid work but had a job or retired in the last 12 months, please use the person's last occupation.

Parent/guardian 1	Parent/guardian 2
<input type="checkbox"/> Group 1 Senior management in large business organisation, government administration, and qualified professionals <input type="checkbox"/> Group 2 Other business managers, arts/media/sportspersons, and associate professionals <input type="checkbox"/> Group 3 Tradesmen/women, clerks and skilled office, sales and service staff <input type="checkbox"/> Group 4 Machine operators, hospitality staff, assistants, labourers and related workers <input type="checkbox"/> Other Not in paid work in the last 12 months	<input type="checkbox"/> Group 1 Senior management in large business organisation, government administration, and qualified professionals <input type="checkbox"/> Group 2 Other business managers, arts/media/sportspersons, and associate professionals <input type="checkbox"/> Group 3 Tradesmen/women, clerks and skilled office, sales and service staff <input type="checkbox"/> Group 4 Machine operators, hospitality staff, assistants, labourers and related workers <input type="checkbox"/> Other Not in paid work in the last 12 months

Section 6 Sibling Information

Does the student have any brothers or sisters at this school?

Yes No If yes, provide details below

Sibling's given names	Surname	Date of birth
		/ /
		/ /
		/ /
		/ /

Section 7 Additional Emergency Contacts

For an emergency where the parent/guardian/carer cannot be contacted, please provide alternative contacts. For independent students this is the 1st point of contact in an emergency.

	Contact 1	Contact 2
Title: (Mr/Ms/Mrs/Miss)		
Name:		
Relationship: (e.g. aunt, friend)		
Phone 1:		
Phone 2:		

Section 8 Medical Details and Consent

Does your child suffer from any of the following?
(Tick all the boxes that apply)

- Allergies
 Asthma
 Diabetes
 Seizure disorder (e.g. epilepsy)
 Hearing impairment
 Physical disability
 Speech impairment
 Visual impairment
 Intellectual/learning impairment (e.g. dyslexia)
 Acquired brain impairment
 Mental health or behaviour issue (e.g. depression, ADHD)
 Other, please specify: _____

If you have ticked any of the boxes above please provide further information. Also provide details if the student has any special needs or requires support in school (including details of previous special needs assessments undertaken by a school etc).

<input type="checkbox"/> Medication required. Please supply details of any treatments, care or medication required. (contact school for relevant forms)	
Relevant medical consent forms completed and attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No, not required
Immunisation certificate/record provided:	<input type="checkbox"/> Yes <input type="checkbox"/> No
I give consent to the sharing of health information between schools and Department of Health and Families (DHF) as stated in the privacy statement (for more details see Appendix 1). Health information may be shared with DHF, which offers student health services including nursing, dental, audiology and general health advice. DHF provides feedback to the schools after health checks (e.g. vision or hearing results.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
I give consent to a school health surveillance check when my child is in Transition and/or Year 1 (if applicable).	<input type="checkbox"/> Yes <input type="checkbox"/> No
I give consent to my primary school child having a dental examination (if applicable). Parents/guardians will be notified of the result and asked to give consent for any treatment or referrals. No treatment will be carried out without a current signed consent. Parents/guardians are encouraged to accompany their child to appointments. More information available on website www.health.nt.gov.au/oral_health	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section 9 Additional Consents

Consent for publication of a student's Photo and Work

DET may record sound and/or vision of a student and their work while they are at school or taking part in school related activities or performances. Photographs of students involved in activities, and work by students, are often published to enable the students to share their experiences and to enable parents and others to be informed about the school or college's work. This does not mean that the student loses ownership of the works.

Please provide consent for the following:

	Use of Student Photograph	Use of Work by Student	Publishing Student First Name	Publishing Student Surname
School/College Newsletter	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
School/College Yearbook	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
School/College/Department Website	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

* Consent for all other media usage should be sought as and when required.

<p>Consent for library use I give consent to authorised access of the student's contact details and library borrowings by LINNet (Libraries in the Northern Territory) and associated libraries.</p> <p>School libraries use the contact details to provide library borrowing services to students, and may share this information with LINNet and associated libraries. Only authorised library personnel will have access to this information. Please note failure to provide the information in full or part may result in limiting or preventing the student from borrowing from the school library.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Consent for attending religious instruction I give consent for the student to attend religious instruction. Name of religious instruction you wish the student to attend: _____</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section 10 Declaration

Attachment Checklist	
If the student is enrolling in preschool please complete the preschool enrolment attachment.	<input type="checkbox"/> Attached <input type="checkbox"/> Not applicable
If the student is enrolling in transition please complete the transition enrolment attachment.	<input type="checkbox"/> Attached <input type="checkbox"/> Not applicable
If the student is enrolling in or undertaking a vocational education and training (VET) course please complete the VET enrolment attachment.	<input type="checkbox"/> Attached <input type="checkbox"/> Not applicable

It is your responsibility to notify the school in writing of any changes to the information provided on this enrolment form.

Name of parent/guardian/independent student enrolling the student and providing consents:

(Please print)

Relationship to student: _____

Signature: _____ Date: / /

Name of school witness: _____

(Please print)

Signature: _____ Date: / /

APPENDIX 1 Privacy Statement

For more information regarding the Department of Education and Training (DET) obligations in relation to protecting your privacy, visit www.det.nt.gov.au/foi or contact a DET Information Officer on (08) 8999 5793. We need enrolment details for the following purposes:

Student Details

- This information is required to discuss matters regarding the student's education, for contact in an emergency or for other educational purposes. These other educational purposes may include:
 - the determination of the number of school aged children in a region, allowing DET to plan resourcing for schools;
 - to assist in the provision of transport to and from schools;
 - to determine whether all school-aged children are enrolled in an educational facility as required by the NT *Education Act*;
 - any requirements under relevant laws of either the Northern Territory or Australian Government; and
 - students' names and demographic information may be verified against health records.

Student and Parent Background Information

- Some of this information is a standard requirement on all enrolment forms Australia wide as part of the National Education Agreement. The information you provide will assist school education authorities in ensuring funding and teaching resources are appropriately allocated to Territory schools. Some of this information will be forwarded to the Australian Government as required under the appropriate legislation.

Additional Emergency Contacts

- This is required in the event that the school is unable to contact parents/guardians. Please ensure that the people named have agreed to their details being provided to the school.

Special Family Circumstances

- Additional information about parents/guardians. This is needed so that we are aware of family arrangements e.g. foster care, dual custody, access restrictions. Please provide any relevant Court Orders including access restrictions and parenting plans, and inform the school as soon as possible about any changes to your family arrangements.
- Contact your school principal if you would like to discuss, in strict confidence, any matters relating to these arrangements.

Medical Details and Consents

- Health information is required so that our staff can properly care for your child. Please ensure this is up-to-date, as incomplete or inaccurate health information may put your child's health at risk.
- Contact information may be shared with staff of the Department of Health and Families (DHF) should nurses, dentists, audiology staff and health workers need to contact parents/ guardians. The school may need to disclose personal and sensitive information to medical practitioners, and people providing services to the school, including specialist visiting teachers and counsellors.
- We require details of student medical conditions and/or disabilities, and medication they may need while at school. If possible, please provide medication to the school in an authorised pharmacy packet.
- Please inform the school if your child develops a medical condition that may require regular or emergency treatment by school staff.
- Medical information will be shared with school staff on a "need to know" basis. Relevant sections of your child's medical records may be held at the school in suitable locations to ensure that appropriate action is taken in emergencies.
- Health information may also be shared with DHF, which offers student health services including nursing, dental, audiology and general health advice. DHF provides feedback to the schools after health checks (e.g. vision or hearing results) to ensure the student is properly cared for at school.
- DHF may provide medical information back to the school to assist in planning appropriate health interventions and to assist in classroom curriculum activities.

Please contact the school if you require further information or clarification regarding the DET Medications Policy.

Access to Your Child's Record Held by the School

In most circumstances you are able to access your child's records. Please contact the Principal to do so. If you have any concerns about the privacy of this information please contact the Principal.

APPENDIX 2

List of Parent or Guardian Occupation Groups

Group 1

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

Senior executives/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 a 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 2

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, proof reader, 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 3

Tradesmen/ women, clerks and skilled office, sales and service staff

Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/ women are included in this group.

Clerks [bookkeeper, bank clerk/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 desk, admissions clerk]

Skills office, sales and service staff

Office [secretary, personal assistant, desktop publishing operator, switchboard]

Sales [company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher]

Service [aged/disabled/refugee/child care 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, kitchenhand, porter, housekeeper]

Office assistants, sales assistants and other assistants.

Office staff [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 are 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]

PARENT/ CAREGIVER CONSENT AUTHORITY

Child/Student SURNAME:	Date of Birth <small>Click here to enter a date.</small>
Child/Student GIVEN NAME:	Age School year level:
School:	<input type="checkbox"/> Male <input type="checkbox"/> Female

FAMILY DETAILS

<input type="checkbox"/> Mother <input type="checkbox"/> Caregiver <input type="checkbox"/> TF Case Manager Name	<input type="checkbox"/> Father <input type="checkbox"/> Caregiver <input type="checkbox"/> TF Case Manager Name
Home address <input type="checkbox"/> Primary Residence	Home address <input type="checkbox"/> Primary Residence
Postal address	Postal address
Phone (business hours) Mobile	Phone (business hours) Mobile
Email	Email
Interpreter required? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please specify for whom and which language

AGENCIES OR PROFESSIONALS eg Medical Specialist, General Practitioner, NDIS, Therapist

Agency Professional	Contact Person	Contact Details

The school team should ensure that the student and parents (where applicable), are supported to understand the role of Student Wellbeing and Inclusion advisors and to record agreement with actions as listed below, where appropriate:

INFORMED CONSENT

The school team has discussed with me the educational support requirements for my child and I agree to work with the school team to achieve positive learning outcomes for my child.

I consent to the school sharing relevant personal information about my child with a Student Wellbeing and Inclusion advisor. I understand that the name of this advisor will be provided to me.

I consent to the provision of services to my child by Student Wellbeing and Inclusion, which may include assessment, counselling, observation, advice, in-class support, teaching strategies and ideas, and the development of a plan to meet the needs of my child.

I consent to Student Wellbeing and Inclusion obtaining medical and educational information from other agencies which is considered relevant to the provision of services to my child. This includes medical reports, hearing and vision assessments and any other relevant allied health or education reports.

I agree that any information collected about my child will be accessed and collated as confidential information and placed on a secure electronic database and hard-copy file in regional offices.

I consent to the use of the collected information about my child for the purposes of compiling a developmental learning profile.

Parent/ Caregiver Signature:	Date:
Parent/ Caregiver Name:	
Student Signature:	Date:
School Team Representative Name:	Position:
School Team Representative Signature:	Date:

Acceptable Use Agreement for Early Years Students

The following agreement covers the student's use of Internet, intranet, portal, student profiles, network and email.

_____ School provides all students enrolled at the school with Information Communication and Technology (ICT) facilities for educational use.

As your child is considered too young to fully understand this type of agreement, therefore you are asked to read through the document carefully, and to sign it if you grant approval for your child to make use of the available facilities.

Students may use these facilities for class work, research and communication. The resources provided include computers and peripherals, access to network resources, e-mail, the NT DET Educational Portal and the Internet. Care must be taken to ensure the resources are protected from harm and that no users are exposed to materials considered offensive or illegal. In order to have access to the school's ICT resources, parents / guardians and students must agree to abide by the school's Acceptable Use Agreement.

1. Only software purchased or approved by the school, and installed by the school, can be used on school equipment.
2. Software copyright is to be observed at all times. It is illegal to copy or distribute school software. Illegal software from other sources is not to be copied to or installed on the school equipment.
3. Students must respect intellectual property and adhere to copyright, software piracy and fair dealing laws associated with learning technologies.
4. Students must follow the rules posted for the use and care of the computer equipment at all times.
5. Students using the ICT facilities may only do so under the supervision of school staff. Any students not following staff instructions may have further access restricted or denied.
6. Privacy and network security is to be observed. Students must not under any circumstances access personal files belonging to others, software or areas of the network which are not designated for their use.
7. The sharing of passwords is a security risk. Students must not give their password to other students or log in with another users name under any circumstances.
8. All users must log off when leaving a computer.
9. There should be no disruption to class activities by unauthorised broadcast messages across the school network.
10. Virus protection is very important. If students use portable drives or discs to transfer work between the school network computers and computers outside the network, disks must be scanned for viruses prior to use on the school network. Virus checking software will be made available on the school computers for this purpose.
11. Printing of materials of a personal nature or unassociated with school activities are not permitted unless approval is sought from a school staff member. This may incur a charge.

12. The use of ICT facilities, specifically the Internet, is for educational, communication and research purposes only:

- Deliberate attempts to look for or download and use material that is illegal or which would be thought of as offensive is not permitted. Only materials required for school activities as directed by teachers may be downloaded. If students should unknowingly navigate to a web site that contains material that may be considered offensive, they must clear the screen immediately and notify the teacher.
- Inappropriate language or harassing others when communicating online is not permitted.
- Privacy and ownership of others' work and materials from web sites must be respected at all times.
- The use of on-line chat facilities and instant messaging must only be carried out under the supervision of a staff member and must only be as part of educational on-line activities. Safe Internet practises must be applied.
- Personal details of students may only be provided online if permission is given by a teacher.

Note: Deliberate misuse of computer equipment and software or deliberate breaches of the conditions of this agreement may result in access restrictions to ICT facilities by the student (s) involved and result in discipline by school administration.

By signing this agreement and using the equipment and resources of _____ School, the parent acknowledges the conditions under which their child will use the ICT facilities.

Parent

I understand the conditions under which ICT facilities are made available and agree to those conditions. I further understand that additional explanations have been provided to my child, copies of which can be obtained from the school upon request.

I understand that my child may be accessing the Internet for educational purposes or in accordance with this Agreement.

I understand that any use of facilities contrary to this Agreement, or generally, will be treated as a breach of school discipline and shall be dealt with accordingly.

The school reserves the right to vary the terms of this Agreement to accommodate unforeseen circumstances relating to the use of facilities by students. Variations shall be in writing signed by the school Principal, and shall be distributed to students and shall take effect accordingly.

Please Print (Parent / Guardian) Name: _____

Student Name: _____

Address: _____

Signature: _____

Agreement signed this _____ day of _____, 20____



What is OSHC and why is it right for your family?

OSHC stands for Outside School Hours Care. Camp Australia's OSHC service provides enrichment and care for primary school-age children outside school hours and during the school holidays. Depending on your school, it can cover Before School Care, After School Care and Vacation Care.

At Camp Australia, our vision is *To support families in achieving their dreams* and our promise that is that we will *Guide Your Child's Growth*.

To do that we take a unique approach to OSHC based on over 30 years of experience.



Enriching experiences that children love

Our experienced educators involve your child in designing the experiences that make up our OSHC program. Our industry leading approach to program development ensures that your child is at the heart of what we do each day.

A place for friendships to form

OSHC is a great place for your child to meet new friends and bond over shared interests. We design programs that bring children together so they can connect and grow outside school hours.

Easy, hassle-free care

Our service is available to all families, no matter the need. Our extended hours offer peace of mind so you can manage work, health, study and more stress-free. Plus, our industry leading Parent Portal gives you unrivalled access to make and manage your bookings.



FREE to Register

Once registered, you'll be able to easily make and manage your bookings online via our Parent Portal at pp.campastralia.com.au

Are you eligible for the Child Care Subsidy?

The Child Care Subsidy can provide up to 85% off your fees. If you're unsure about your eligibility contact Centrelink on 13 61 50.

Make and manage bookings using the Parent Portal app for smartphone

We conducted customer focus groups to get direct feedback from parents regarding their experience with Camp Australia.

This research highlighted the need to have a streamlined way for parents to access their accounts and manage their bookings and enrolments; and informed the design for our brand-new Parent Portal app for smartphone.

- Easy booking features.
- Simple booking calendar overview.
- Track your spend.
- Contact your service Coordinator.
- Update your and your child's details.



Search for **Camp Australia Parent Portal** on the App Store or Google Play, to download the app and register free with us now.



Outside School Hours Care

at Ludmilla Primary School

At Camp Australia, we provide tailored enrichment to children before school, after school and on their holidays. Our engaged educators foster a safe, inclusive environment where the children can relax, have fun and grow.

To find out more information on Ludmilla Primary School's fees and policies, visit <https://www.campastralia.com.au/schools/details/FEFO>



Fees accurate as of May, 2022

Fees and Times

Program	Times	Recurring (full Fee)	Recurring (after max. CCS*)	Casual (full Fee)	Casual (after max. CCS*)
Before School Care	06:30 AM - 08:30 AM	\$19.30	\$2.89	\$24.30	\$3.64
After School Care	02:30 PM - 06:00 PM	\$34.20	\$5.13	\$39.20	\$5.88

Casual Bookings

Casual Booking notice: none
 Casual Cancellation notice: 2 days in advance
 No minimum number of bookings

Rocketeers Late Booking Fee

Late booking fee applies if a booking is made with less than 7 day's notice. Bookings made at least 7 days in advance of the session day are charged the early fee.

Child Care Subsidy* (CCS)

The Child Care Subsidy can provide up to 85% off your fees. Your eligibility is determined by your family's annual adjusted taxable income, the type of childcare you use, and your activity level. To find out if you're eligible, contact Centrelink on 13 61 50.

Recurring Bookings

Recurring Booking notice: 48 hours in advance
 Recurring Cancellation notice: 7 calendar days in advance
 Minimum number of 2 bookings made at the same time, as recurring booked days over 2 or more weeks.

Sick child? No charge

No matter the cancellation rules, we operate a standing policy that there is no charge for a sick child. Simply let us know when cancelling a booking outside the cancellation window, provide a doctor's certificate and there will be no fee charged.

Enrolment Fee: \$25

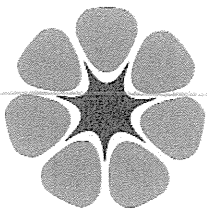
**Your
OSHC.**

Book now: www.campastralia.com.au



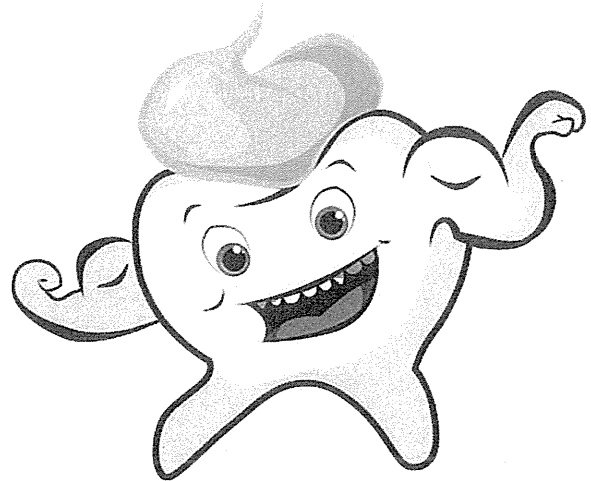
ROCKETEERS

Details of all fees, terms and conditions are available at www.campastralia.com.au
 Need Help? Our Customer Care Team are available 5am-9pm AEST on **1300 105 343**



CONSENT FORM

Top End Oral Health Service Fluoride Varnish Program



Dear Parent/Carer

Your child's school is taking part in a Fluoride Varnish Program, which aims to improve the dental health of local children.

The application of fluoride varnish is recognised as a safe and effective way for reducing dental decay. Fluoride varnish is a highly concentrated form of fluoride that is directly applied to teeth by a trained health professional. It forms a waxy coat that sticks to the teeth until it is worn off by chewing or brushing. Fluoride varnish is recommended for infants and children every 3 to 6 months, based on the risk of dental decay.

Fluoride varnish is complementary to other forms of fluoride use, such as fluoridated water and toothpaste. Fluoride varnish, in conjunction with fluoridated water, provides an additional amount of protection for the next few months to help stop the progression of early decay and assist in preventing new cavities.

TEOHS will support an Oral Health Therapist / qualified health professional to regularly attend your child's school to apply fluoride varnish. This dental visit will not replace your child's usual check-up and you are encouraged to make an appointment if your child has not had a check-up in the last 12 months.

Please inform the school if there are any changes to your child's medical history.

This consent will remain valid for your child's primary school life. If at any time, you wish to withdraw consent you can do so by contacting your school or Top End Oral Health Service on **(08) 8922 6466**.

If you have any questions or would like to know more about the program, please call (08) 8922 6466.

Please sign the consent form overleaf and return it to your child's school.

Media and intellectual property – student consent form

Before you fill in the form

The Department of Education (the department) takes privacy seriously and is bound by the *Information Act 2002* (NT) and its Information Privacy Principles in how we collect, use, disclose and destroy personal information.

This document gives the Northern Territory (NT) Government and the department permission to use the works created by students in the course of their studies for purposes associated with the promotion of the department or the NT Government, and in educational resources created or published by the department or the NT Government. This does not mean that the student will lose ownership rights over their works – simply that the department has permission to use their works for the purposes mentioned. This document also gives permission for media organisations, with granted permission from the department, to use the works created by the student identified in this form.

Details	
Name of student	
Name of parent	
Address	
School	
Is the student of Aboriginal or Torres Strait Islander descent?	Yes/No
As the student or parent completing this form, I acknowledge:	
During the course of the student's studies with the department they may produce works that create intellectual property rights, for example, copyright. These works may form part of their academic assessment or their studies generally.	Yes/No
These works might include their written work such as stories and poems, paintings, pictures, drawings, designs, photographs, videos, films, music, performance, computer programs, websites, sculptures, fashion or costume, metal or woodworks or any other works they create.	Yes/No
The department may record sound and vision of the student and their works whilst at school or taking part in school-related activities or performances, provided they also have an approved Talent Release Form.	Yes/No
The department understands that the student owns the intellectual property rights to their works and that this consent form does in no way transfer ownership.	Yes/No

Media and intellectual property – student consent form

The student gives permission to the NT Government, the department and media organisations with the department's permission, to use their works, their sound, their vision and their name in publications, communications and media generally.			Yes/No
The student understands that should they choose to withdraw their permission, they can only do so by notifying the department in writing, and understand that their withdrawal of permission is not retrospective.			Yes/No
The department understands that the student may choose to give permission to other people to also use their works.			Yes/No
The student understands that by giving this permission, the department can use their works, sound and vision, as specified in the following table below, in any way it chooses, for the purposes described above. It may be reproduced in any form, in whole or in part, and distributed by any medium including but not limited to, the department's intranet and internet, social media, department publications such as newsletters, documents, presentations, professional development materials or displays, or other multimedia uses.			Yes/No
The department may disclose the student's works, sound, vision and name, or permit other people to use and reproduce these on similar terms to this consent. The student understands that the department may not always name them in recordings, images or copies of their work and they consent to any uses that might otherwise breach their moral rights, for example – the right to be named as the creator of their work.			Yes/No
The student understands that they will not be paid by the department for giving this permission or for the use of their works, sound or vision, and the department will not receive any payment for the use of their works, sound or vision.			Yes/No
The student is aware they can request access to their personal information that is collected and that further information on how to apply for access is found in the department's Privacy Policy or in the <i>Information Act 2002</i> (NT).			Yes/No
The student gives permission to the NT Government and the department to publish, reproduce and communicate the student's copyright works in the following formats, including the student's full name			
Written work, for example – stories and poems	Yes/No	School projects	Yes/No
Artwork	Yes/No	Music or sound recordings	Yes/No
Photographs	Yes/No	Videos and films	Yes/No
Any special considerations for use of the visual or audio recordings?			
Consent			
Signature of student		Date	
Signature of parent		Date	

Name and signature of witness		Date	
Name and signature of educator		Date	

Further information

For more information please contact:

Ludmilla Primary School

Phone: (08) 89837888

Email: admin.ludmilla@education.nt.gov.au