



# BURLEIGH HEADS STATE SCHOOL

## PERMISSIONS FORM

STUDENT \_\_\_\_\_

### PARENT/ GUARDIAN CONSENT

#### HEAD LICE

- I agree to abide by the school policy that if my child is suspected of having head lice, I will be contacted to pick them up and appropriately treat their hair prior to returning them to school.

#### MEDICATION

- I understand that if my child needs medication while at school, that school staff will only administer medication if:
- I must complete a School Medication Form
  - I must supply written advice from a medical practitioner
  - I must supply the medication in the original prescription labelled container.

#### ASTHMA

Please tick the appropriate category in which your child's asthma condition is situated:

- Child does not have asthma.
- The child has mild Asthma only. In the event of an attack the child's parent/guardian authorises their child to be administered medication by an adult and understands that a parent or other emergency contact will notified.
- Child is capable to self-administer Asthma medication as needed but with adult supervision.
- Parent/guardian requires that the child's Asthma medication be held at the office and administered by an adult.
- Child proficient to self-administer Asthma medication as needed.

#### ANAPHYLAXIS

My child requires an individual Anaphylactic Action Plan. YES  NO

#### PRIVACY STATEMENT

I have read the Education Queensland's Privacy Statement. YES  NO

#### CHANGE OF PERSONAL DETAILS

- I agree to notify the School of any changes in personal details (ie: address, contact phone numbers, emails address) immediately so that accurate records can be maintained, particularly in case of emergency.

#### EDUCATION SUPPORT

- I have notified the Principal / Deputy at Burleigh Heads State School of any previous Support that my child has received (eg: Learning Support / Special Education Support) from any other school.

#### SUSPENSIONS/EXCLUSIONS

- I have notified the Principal / Deputy at Burleigh Heads State School of any previous Suspensions/Exclusions from any other school.

# STUDENT CONSENT

## RESPONSIBLE BEHAVIOUR PLAN FOR STUDENTS

I agree to follow the school Responsible Behaviour Plan for Students.

## STUDENT DRESS CODE & SUN SAFETY

I agree to follow the school Student Dress Code & Sun Safety guidelines.

## HOMEWORK

I agree to follow the school homework guidelines.

## STUDENT'S USE OF THE INTERNET

While I use the Internet:-

- ❖ I **will** use it only for educational purposes.
- ❖ I will **not** look for anything that is illegal, dangerous or offensive.
- ❖ If I do come across an illegal, dangerous or offensive site I will close the browser and immediately and quietly inform the teacher.
- ❖ I will **not** use the email facility unless given specific permission to do so.
- ❖ I will **not** reveal surnames, home addresses or phone numbers – mine or anyone else's.
- ❖ I will **not** use the Internet to annoy or offend or bully anyone else.
- ❖ I **understand** that if the school decides I have broken these rules, appropriate action will be taken. This may include loss of my Internet access for some time.

I understand and agree to follow the school rules regarding the student's use of the Internet.

I hereby declare that the information given is true and correct as at the date of enrolment.

Signed: \_\_\_\_\_  
(Student)

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signed: \_\_\_\_\_  
(Parent/Caregiver)

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signed: \_\_\_\_\_  
(Burleigh Heads State School Administration)

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_