



Working Together

SIGN FRONT AND BACK PAGES

Child's Name: _____ **Child's Class:** _____

Dear Parents/Carers,

This note is designed to streamline our permission note system. It may seem like a lot of places to sign, but the note will replace several notes that we have used in the past. This note will be filed in your child's Student Record Card and will remain current for the time they are enrolled at Sefton Infants School. Please complete the note and return it to the office as soon as possible.

Yours sincerely,

S. Labbe
Principal

1. PERMISSION TO WALK OUTSIDE SCHOOL GROUNDS

There are certain areas of the curriculum set down by the Department of Education that are benefitted by visiting areas outside of the school grounds. Some of these subjects include Mathematics, Sport, HSIE and Science. We ask that you sign this "Permission to Walk" note, to allow your child this valuable experience. Children may walk to local parks such as Allder Park and Maluga Passive Reserve or other local venues and are always carefully supervised by their teachers. These activities take place throughout the school year and are approved by the Principal.

I give permission for my child to walk to local parks and venues near Sefton Infants School as described above.

Parent/Carer Signature: _____ Date: _____

2. AUTHORITY TO PUBLISH PERMISSION NOTE

Sefton Infants School is seeking your permission to publish content that may identify your child in school communications. Content examples include but are not limited to photographs, text, illustrations/graphics, videos, sound recordings and samples of student work.

The communications in which your child's information may be published include but are not limited to:

- Public websites of the Department of Education including the school website, the Department of Education intranet (staff only), blogs and wikis;

- Department of Education publications including the school newsletter, annual school magazine and school report, promotional material published in print and electronically including on the Department's websites;
- Official Department and school social media accounts on networks such as YouTube, Facebook and Twitter.

I have read this form and agree to the school obtaining and publishing content related to my child in school communications.

Parent/Carer Signature: _____ Date: _____

~~~~~

### **3. PERMISSION FOR CHILD PROTECTION LESSONS**

As part of the Personal Development, Health and Physical Education curriculum, students will participate in Child Protection lessons. These lessons will help children to identify dangerous or uncomfortable situations and to advise them to seek help from trustworthy adults. Some lessons may involve the naming of parts of the body.

The Child Protection lessons have been developed by the Department of Education and they are an important priority for schools. We trust that you will support your child's participation in the program. Please contact the school if you have any questions regarding the subject matter.

*I give permission for my child to participate in Child Protection lessons as part of their school curriculum.*

Parent/Carer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

~~~~~

4. CHANGING PERMISSIONS

The above permissions will remain current while your child is enrolled at Sefton Infants School. If you wish to change any of these permissions we ask that you notify the school in writing.

I understand that the above permissions cover the years that my child is enrolled at the school unless specifically rescinded by me in writing.

Parent/Carer Signature: _____ Date: _____