



**PARENT CONSENT FORM AT SUNSHINE HARVESTER PRIMARY SCHOOL  
(VALID FOR DURATION OF ENROLMENT)**

Student Name: \_\_\_\_\_ Date enrolled: \_\_\_\_\_

**TO OBTAIN INFORMATION FROM PREVIOUS SCHOOLS**

I give permission for Sunshine Harvester Primary School to obtain:

- Files from previous school/s that are maintained by classroom teachers for purpose of conduction educational programs including copies of the student's individual reports;
- Student services files from previous school/s if appropriate (inclusive of assessments by the school guidance officer, speech therapist & welfare officer);
- Information or files from outside organisations such as paediatricians, hospital reports & learning centres.

I understand that these files will be obtained by registered mail, electronically transferred or hand delivered from the previous school/s or organisation/s. I give permission for Sunshine Harvester Primary school psychologist, speech therapist or welfare/social worker to gather information from all sources in their field of expertise to assist my child's educational requirements.

I also consent to the Principal of Sunshine Harvester Primary School to discuss aspects relating to my child's education with the relevant staff of this school and understand that this information will be used to help plan an educational program for my child.

Signed \_\_\_\_\_

**EXCURSIONS (local)**

I give permission for my child to attend local excursions. I am aware that my child will be walking on these excursions. I am also aware that if my child does not abide by the school rules, behaving in a safe & sensible manner, he/she will not be permitted to attend the next excursion.

Consent for medical attention

Where the teacher in charge of the excursion is unable to contact me, or it is otherwise impractical to contact me. I authorise the teacher to:

- Consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner
- Administer such first aid as the teacher in charge may judge to be reasonably necessary.

Signed \_\_\_\_\_

**PHOTO PERMISSION:**

I give permission to my child to have their photo taken for news articles, website, digital screen and advertising relating to a school activity, both in printed and electronic media. Children's' surnames will not be published.

Signed \_\_\_\_\_

**FOOD ALLERGY**

The preparation, cooking and of food may at times be incorporated into the teaching program at Sunshine Harvester Primary School. This activity usually culminates in eating the food. Food may also be eaten as part of celebration of achievements & particular days. To ensure your child’s wellbeing during these experiences we need to be aware of any allergies he/she may have to particular foods.

Please list below any foods to which your child may be allergic and therefore should not handle or consume.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Signed: \_\_\_\_\_

**HEAD LICE INSPECTION**

Throughout your child’s schooling, the school will be arranging head lice inspections of students. The management of head lice infection works best when all children are involved in our screening program. The school is aware that this can be a sensitive issue and is committed to maintaining student confidentiality and avoiding stigmatisation. The inspection of students will be conducted by a trained person approved by the Principal and School Council.

Before any inspections are conducted the person conducting the inspections will explain to all students what is being done and why, and it will be emphasised to students that the presence of head lice in their hair does not mean that their hair less clean or well-kept than anyone else’s. It will also be pointed out that head lice can be itchy and annoying, and if you know you have them, you can do something about it.

The person conducting the inspections will check through each student’s hair to see if any lice or eggs are present. Persons authorised by the School Principal may also visually check your child’s hair for the presence of head lice, when it is suspected that head lice may be present.

In cases where head lice are found, the person inspecting the student will inform the student’s teacher and the Principal/ Assistant Principal. The school will make appropriated contact with the parents/guardians/carers.

Please note that health regulations require that where a child has head lice, that child should not return to school until appropriate treatment has commenced. The school may request the completion of an “action taken form” which requires parents/guardians/carers to nominate if and when treatment has begun.

Signed \_\_\_\_\_

**ABSENCE NOTIFICATION**

Parents are legally required to ensure their child attends school every day or provide an explanation for their child's absence from school. Parents have an obligation to notify the school as soon as possible on the day of the absence using the school’s preferred method (that is via an IT platform, app, phone or email) or inform the school in advance of any upcoming absences.

This requirement supports student safety and wellbeing. Schools need to know when and why a child is absent, and parents/carers need to know if their child is not at school. Prompt communication also promotes daily school attendance.

If your child is absent for 3 days or more due to illness, the school request you to provide a medical certificate.

In case of upcoming extended absences such as family holidays during school term, parents/guardians are asked to give the school advance notification, to enable the school to prepare a learning plan for your child/children.

Signed \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_ CONTACT NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_