

Photograph Permission Form

I _____ parent/caretaker of _____ has been advised that:

From time to time, Staff of Endeavour Sports High School will take photographs, including digital photographs of students undertaking school lessons and performances. This includes PE, sports carnivals and events, performing arts, excursions, camps, ceremonies and other educational activities conducted in the school and within a school context. These images may also be used during school visual presentations and within the school intranet. It is possible that some photographs may be taken by parents who accompany staff.

- I consent to photographs being taken for this purpose.
- I **do not** consent to these photographs being taken. (If a request for a photograph or publication of a photograph is refused as a consequence of consent not being granted, the person whose request was refused will be informed as to the reason of that refusal.)
- I consent for images of my child to be used within media publications (newspapers) and school newsletters.

Please be aware this consent will be effective for the duration of your child's schooling at Endeavour Sports High School. If you would like to change this consent at any time, this must be given in writing to the office, signed and dated by the student's parent or guardian.

Signed: _____
(Parent/caretaker)

Date: _____



Authority to Publish Form

Dear Parent or Carer

I am seeking your permission to obtain and publish content that may include the image and/or name of your child in our publicly available school communications. These could be in print, video, and/or our publicly available school website and/or Facebook.

Content examples include but are not limited to photographs, text, illustrations/graphics, videos, sound recordings, examples of student work.

Our school communications include but are not limited to:

- school's public website
- Facebook
- school newsletter (online and hard copy)
- annual school magazine
- local community newspaper / magazine
- media promotions and advertising activities
- electronic and print promotional material
- annual school report

If you agree, please complete the permission slip and return to the school.

Yours sincerely

James Kozlowski
Principal
Endeavour Sports High School

Permission to Publish

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

I give/do not give permission for my child's name to be included in the publication.

This signed permission remains effective until I advise the school otherwise.

Son/Daughter's name.....

Parent/carer's name.....

Parent/caregiver Date.....

Telephone (H) (W).....



Talent and Parent/Guardian publication consent form

NSW Department of Education and Training

Parent/Guardian consent

[For talent UNDER 18 years of age]

I hereby consent to my son/daughter/ward (name)

attending (school name)

being photographed/filmed/interviewed for our school's and NSW Department of Education and Training's promotional activities.

I understand that this could include (but is not limited to) distribution of talent's (son/daughter/ward) image on the school's/Department's website; general exhibition at school events; television, print and electronic mainstream media and other associated promotional material.

Parent/guardian signature

Date

Talent consent

[For talent OVER 18 years of age]

I hereby consent (name)

attending (if applicable, school or TAFE NSW course name)

to being photographed/filmed/interviewed for our school's and NSW Department of Education and Training's promotional activities.

I understand that this could include (but is not limited to) distribution of my image/s on the school's/Department's website; general exhibition at school events; television, print and electronic mainstream media and other associated promotional material.

I am over 18 years of age. I have read this release and I understand what it means.

Signature

Date

Witness name

Witness' residential address

Telephone

ENDEAVOUR SPORTS HIGH SCHOOL

Student Asthma Record

This record is to be completed by parents/carers in consultation with their child's doctor (general practitioner). Parents/carers should inform the school immediately if there are any changes to the management plan. Please tick the appropriate box, and print your answers clearly in the blank spaces where indicated.

Student's name: Gender: M F

(Surname) (First Names)

Date of birth/...../..... Class Teacher

DOES YOUR CHILD HAVE ASTHMA Yes No

If yes, please complete details below **TICK APPLICABLE BOX**

Emergency Contact (eg parent or carer):

a Name..... Relationship

Telephone (Home) Telephone (Work)

b Name..... Relationship

Telephone (Home) Telephone (Work)

Doctor Telephone

Usual Asthma Management Plan

Child's Symptoms (eg cough)

Triggers (eg exercise, pollens)

Medication Requirements:

Name of Medication	Method (eg puffer & spacer, turbuhaler)	When and how much?

In an **EMERGENCY**, follow the Plan below that has been ticked

Standard Asthma First Aid Plan Please tick the preferred box

- Step 1** Sit the student upright, remain calm and provide reassurance. Do not leave student alone.
- Step 2** Give 4 puffs of a blue reliever puffer (*Airomir, Asmol, Epaq or Ventolin*), one puff at a time, preferably through a spacer device*. Ask the student to take 4 breaths from the spacer after each puff.
- Step 3** Wait 4 minutes.
- Step 4** If there is little or no improvement, repeat steps 2 and 3.
If there is still little or no improvement, call an ambulance immediately (Dial 000).
Continue to repeat steps 2 and 3 while waiting for the ambulance.

OR * Use a blue reliever puffer (Airomir, Asmol, Epaq or Ventolin) on its own if no spacer is available.

My Child's Asthma First Aid Plan (attached)

Additional Comments:

.....

I authorise the school staff to follow the preferred Asthma First Aid Plan and assist my child with taking asthma medication should they require help. I will notify you in writing if there are any changes to these instructions. Please contact me if my child requires emergency treatment or if my child regularly has asthma symptoms at school.

Signature of Parent/Carer: **Date:**

I verify that I have read the preferred Asthma First Aid Plan and agree with its implementation.

Signature of Doctor:..... **Date:**.....



Students with severe allergies Response Sheet

*This form is to be completed by the parent of a child with an allergy and returned to the principal.
The purpose of collecting this information is to identify children whose parent will need to provide further medical information.*

Severe allergy (anaphylaxis) alert

Student's Name: Roll Class

ERN Number: Date of Birth:

Parent/Caregiver name: Mobile:

Parent/Caregiver address:

Please complete the questions below and return to the enrolment officer.

1. My child has an allergy to:
- insect sting
.....(specify)
 - drug
.....(specify)
 - food:

peanuts	Y/N
other nuts	Y/N
fish	Y/N
shellfish	Y/N
other	
.....(specify)	
 - latex
 - other(specify)

2. My child has been hospitalised with a severe allergic reaction. yes no

3. My child has been prescribed an EpiPen. yes no

Completed by (date):
(parent/guardian's signature)

Secure Internet Browsing and Email for Students

Dear Parent or Caregiver,

The NSW Department of Education and Training is committed to providing a secure e-Learning environment to enrich learning opportunities for all students in NSW public schools. Your child/children will be provided with access to secure Internet browsing and email.

Email is a method of communicating on the Internet by sending and receiving written messages. Your child's/children's email account is protected by software to block out inappropriate messages. Your child/children will be provided with an individual username and password to access filtered Internet browsing and email at school. Their user name and password will ensure that they receive Internet filtering and that no one else can access their email.

All students who use the Internet at school are taught that they must follow the code of conduct outlined in each school's Student Access to the Internet Policy. This policy includes the action that may be taken by a school if students do not follow this code of conduct. This policy also follows specific privacy guidelines which make it clear that personal information and information that would mean they could be identified is not to be revealed and that personal account details remain confidential. Contact the school if you would like a full copy of this policy.

Students will be able to access their personal email from computers at home and other locations through private Internet service providers. All Internet browsing at home will be directed through your own Internet service provider. We recommend that you install filtering software at home and be aware of filtering software at other locations.

As long as your child/children are enrolled at a public school or TAFE college in NSW they will have access to secure Internet browsing and email. **The NSW Department of Education and Training respects your right as a parent to refuse your child permission to access this facility. If you do not agree to your child having access to this facility, you will need to provide notification in writing to the school within 2 school weeks of receiving this letter.**

If prior to 2006 you refused to provide permission for your child/children to have an e-Learning account, your child/children will not be provided with access to secure Internet browsing and email. Parents can contact the school at any time and request for an e-Learning account to be provided to their child/children. This request should be forwarded to the school in writing.

Further information about secure Internet browsing and email is available on the NSW Department of Education and Training website at: www.det.nsw.edu.au or by telephoning or emailing the school.



ENDEAVOUR SPORTS HIGH SCHOOL Student Internet Acceptable Usage Policy

With 180 computers, 6 Technology Centres and a school wide rewiring of the computer network, Endeavour Sports High School Now offers more efficient access to the Internet for all students. As well as enhancing the quality programs currently being offered at Endeavour, these Technology Centres offer students the opportunity to develop electronic information research skills, which are required as essential knowledge both now and in the future.

Access to telecommunications will enable students to explore thousands of libraries, databases, bulletin boards and the Internet while exchanging messages with people throughout the world.

We are aware, however, that unacceptable material is available on line. No software is entirely effective in blocking access and, therefore, we cannot guarantee that your child will not gain access to inappropriate material. The school uses the DET service, Smart Filter, to limit access to services which are inappropriate. In addition, students are supervised at all times whilst accessing the internet and are requested to notify the supervising teacher if they come across inappropriate sites.

The School believes that the benefits to students from being able to access and retrieve information from these resources and the opportunities this provides for collaboration exceed the disadvantages. However, access is a privilege and not a right. Access entails responsibility.

In keeping with our School's aim of a safe environment for all students, the following Acceptable Use Agreement has been drawn up.

STUDENT INTERNET ACCEPTABLE USE AGREEMENT

1. The School Internet account exists to provide access to curriculum related information. I shall not use a school account to look for material, which is unrelated to the School curriculum unless the supervising teacher has given permission.
2. Publications dealing with socially unacceptable material are not permitted at the School. I shall not use the Internet to access unacceptable material.
3. I will not give out any personal information about myself, my family, the school or anybody else. This includes my address, telephone number, parents' work address and telephone number, or name and location of my school.
4. Information published on the Internet may be inaccurate or may misrepresent a person or situation consequently I shall take care in my use of this information.

5. All students should abide by Copyright laws.
I shall not break copy write law by copying and/or redistributing another's work, and I shall not use another person's work without correctly acknowledging them.
6. I will not give out my email address unless authorized by the supervising teacher.
7. I will not access any control panels or change any system programs.
8. I will only use newsgroups, chat or email services specified by the Teacher.
9. I will follow the school rules for conduct, these being:-
 - a) Follow Teachers' instruction
 - b) Let others do their work
 - c) Do your best work
 - d) Respect other people and their property
 - e) Bring the correct equipment
 - f) Always be on time
 - g) Be polite

Please discuss the Student Internet Acceptable Use Agreement with your child/children. If you have any questions about the agreement contact the school and a member of the technology team will contact you. The agreement should be returned to your child's teacher as soon as possible. Until this agreement is returned signed and dated, your child will not be entitled to have access to the internet.

I have read the Student Internet Acceptable Use Policy and Agreement and agree to follow the rules contained in it. I understand that failure to observe the rules contained in the Student Internet Users Agreement will restrict my access to the School's Internet Service and that this access may be withdrawn and other disciplinary action may result in accordance with the School's Level System.

Signed:..... **Class:**

(Student's Signature)

Name (print): **Date:**

Parent/Guardian

I have read the Student Internet Users' Policy and Agreement for Endeavour Sports High School. I agree that the School wishes to protect my child from gaining access to undesirable material. I accept the conditions for my child that are outlined in the Student Internet Acceptable Use Agreement and give permission for to use the Internet.

..... of class.....

(Student's name)

Signed:..... **Date:**

Parent/Caregiver's Signature)

LANGUAGE BACKGROUND OTHER THAN ENGLISH (LBOTE) INFORMATION
CONFIDENTIAL

ENROLMENT DETAILS

Year: _____ Class: _____ Date: _____

Family Name: _____

First Name/s: _____

Date of Birth: _____

Date of Enrolment at ESHS: _____

LANGUAGE

1. What is the main language spoken where you live? _____
2. What other languages are spoken where you live? _____
3. What language(s) do your parents/carer speak? _____
(This might be with grandparents or other family members)

RESIDENCY

4. Were you born in Australia? **YES** (go to Q7) **NO** (go to Q5)
5. In which country were you born? _____
6. What date did you arrive in Australia? _____
7. In which country was your mother born? _____
8. In which country was your father born? _____
9. Have you ever left Australia? **YES** (go to Q10) **NO** (go to Q11)
10. State which country and the time in months and years you lived there:
Name of Country: _____ Period of Residency: _____

ESL SUPPORT

11. Have you ever attended an Intensive English Centre or English College? **YES** (go to Q12) **NO** (go to Q14)
12. Name of I.E.C./IECHS/College: _____
13. Length of stay: _____
14. Have you ever received ESL support in primary school? _____
15. Have you ever received ESL support in high school? _____
16. How many years have you attended school in Australia? _____
17. What date did you first enrol in an Australian school? _____

VISA

18. Visa Name: _____ Visa No: _____ Visa Sub-Class: _____
19. Expiry Date: _____ Limits on stay in Australia: _____

OFFICE USE

ESL: YES / NO **ESL PHASE:** _____ **ESL Scales Level:** _____