

# REQUIRED DOCUMENTATION TO BE PROVIDED WITH CHILD ENROLMENT CHECK LIST

The Department of Education has designated Southern River College as a **local intake area secondary public school (Year 7-12)**. With the growing number of residents in the area and the changes to the public school system we are unlikely to consider out of boundary applications unless you are accepted into one of our Inspire Focus Programs.

## PROOF OF USUAL PLACE OF RESIDENCE

The College requires a copy of your current rates bill, if owner occupied.

**OR**

A copy of your Rental Agreement, showing a minimum of 12 months tenancy.  
(from a registered Real Estate Agent)

If you are unable to provide one of the above, you must complete a **Statutory Declaration** as well as the person you are residing with. It must state- who you are residing with, the address you are residing, how long you have been residing there and how long you intend to reside at that address.

**The College reserves the right to suspend an enrolment should any of the information supplied on the enrolment application be fraudulent.**

→ Student Name \_\_\_\_\_ Year \_\_\_\_\_ 20\_\_ Parent Check  Office Check

<b>PLUS</b> (minimum of 3 recent documents) these may include copies of		
❖ Power Accounts	<input type="checkbox"/>	<input type="checkbox"/>
❖ Gas Accounts	<input type="checkbox"/>	<input type="checkbox"/>
❖ Removalist Account	<input type="checkbox"/>	<input type="checkbox"/>
❖ Water Rates Account	<input type="checkbox"/>	<input type="checkbox"/>
❖ Telephone Accounts (not mobile phone accounts)	<input type="checkbox"/>	<input type="checkbox"/>
❖ Centrelink Health Care Card	<input type="checkbox"/>	<input type="checkbox"/>
❖ Any other documents that may support the application as proof of residence	<input type="checkbox"/>	<input type="checkbox"/>
<b>Copy of Full Birth Certificate</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Copy of Passport/Visa (if born overseas)</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Copy of Immunisation Records</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Copy of latest School Report &amp; Copy of latest NAPLAN/OLNA Reports (if applicable)</b>	<input type="checkbox"/>	<input type="checkbox"/>
Completed ICT Agreement (Available on our website)	<input type="checkbox"/>	<input type="checkbox"/>
Completed Medical Form (available on our website)	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Diagnosed Learning Difficulty Report (If you have selected YES for Diagnosed Learning Difficulty)	<input type="checkbox"/>	<input type="checkbox"/>
Third Party Online Service Form Completed – link <a href="https://forms.office.com/Pages/ResponsePage.aspx?id=-RaA4P3Ru0yDsLdutDYWJ-SnwCGnTo5PrKEpl0uJn2pUOEY4WFgxTTVHOEhSMVhST0JaSjIUMDY2Wi4u">https://forms.office.com/Pages/ResponsePage.aspx?id=-RaA4P3Ru0yDsLdutDYWJ-SnwCGnTo5PrKEpl0uJn2pUOEY4WFgxTTVHOEhSMVhST0JaSjIUMDY2Wi4u</a>	<input type="checkbox"/>	<input type="checkbox"/>

**Students are required to supply their own Laptop Computer as per our Parent Owned Laptop Program**

**After checking that all the required documents are included, please submit this enrolment application to the Front Administration Office at Southern River College. 71 Southern River Road, GOSNELLS WA 6110**

### OFFICE USE ONLY

	Date	Comment
Entered by		
Transfer sent		
Student Number Requested		
Emergency Action Plans		
Advised : Finance		
Mail Chimp		





## Section 2: Parent/Responsible Person Details

	Parent/Responsible Person 1	Parent/Responsible Person 2
Title: <i>(Mr/Ms/Mrs/Miss)</i>		
First name:		
Surname:		
Relationship to student: <i>(e.g. father, grandmother)</i>		
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
Responsible for payment of Contributions and Charges Note: CC can only be sent to 1 person	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Receive correspondence, reports etc	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Mobile/Emergency Number:		
Postal address: <i>Street</i>		
<i>Suburb/town</i>		
<i>Postcode</i>		
Work telephone:		
Occupation:		
Email address: <b>Mandatory</b> (for correspondence)		
<b>Connect permission</b> Yes <input type="checkbox"/> No <input type="checkbox"/> for accessing student reports and monitoring student information. PLEASE PRINT CLEARLY in the boxes supplied. →		

## Section 3: Parent/Responsible Person Background

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

### Parent/Responsible Person 1

- No, Standard English only  
 Yes, other – please specify \_\_\_\_\_

### Parent/Responsible Person 2

- No, English only  
 Yes, other – please specify \_\_\_\_\_

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

### Parent/Responsible Person 1

What are the **highest** qualification the parent/responsible person has completed?  
 9  10  11  12  please tick?

### Parent/Responsible Person 2

9  10  11  12  please tick?

### Parent/Responsible Person 1

- Bachelor degree or above  
 Advanced diploma/Diploma  
 Certificate I to IV (including trade certificate)  
 No non-school qualification

### Parent/Responsible Person 2

- Bachelor degree or above  
 Advanced diploma/Diploma  
 Certificate I to IV (including trade certificate)  
 No non-school qualification

What is the **occupation group** of the parent/responsible person? 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/Responsible Person 1**

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

**Parent/Responsible Person 2**

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

**Section 4: 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: <i>(Mr/Ms/Mrs/Miss)</i>		
First name:		
Surname:		
Relationship to student: <i>(e.g. father, grandmother)</i>		
Postal address: Street		
Suburb/town		
Postcode		
Telephone:		
Mobile:		
Email Address Please print clearly		

## Section 5: Additional Information

Religion:	
Is the student of Aboriginal or Torres Strait Islander origin? Aboriginal English (AE) is spoken by most Aboriginal Australians. At SRC we want to celebrate and acknowledge AE as one of the many languages spoken by our students.	<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
<b>Does the student speak a language or dialect other than Standard Australian English at home?</b>  <b>Please indicate main language</b> 1. Mainly speak Standard Aus. English at home? <div style="text-align: center; font-weight: bold;">Yes <input type="checkbox"/> No <input type="checkbox"/></div>	<b>2 If not Standard Australian English, what is the main language / dialect spoken at home? _____</b>  <b>3. Students first language or dialect - Standard Aust. English <input type="checkbox"/></b> <b>Aboriginal English <input type="checkbox"/> Karen <input type="checkbox"/> Tagalog <input type="checkbox"/></b> <b>Other _____</b>  <b>4. Previously assessed on the EAL/D Progress Maps Yes <input type="checkbox"/></b> <b>No <input type="checkbox"/></b>
Does the student live outside the Local Intake Area?	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span>
Is the student an Australian citizen?	<input type="checkbox"/> Australian Citizen <span style="margin-left: 50px;"><input type="checkbox"/> Other – please specify</span>
Is the student in receipt of an allowance?	<input type="checkbox"/> Secondary Assistance <span style="margin-left: 100px;"><input type="checkbox"/> Abstudy</span>
Do you possess a current Centrelink Family Health Care Card?	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span>
Do you possess a current Centrelink Pensioner or Concession Card	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span>
<b>Is the student a permanent or temporary resident? Attach copy of Visa and provide Passport</b>	
<input type="checkbox"/> Permanent resident Visa Sub Class	<input type="checkbox"/> Temporary resident Visa SubClass Number: _____ Visa Expiry Date: _____ Date entered Australia: _____
Date entered Australia: _____	
<b>Is the parent/guardian a permanent or temporary resident? Attach copy of Visa and provide Passport</b>	
<input type="checkbox"/> Permanent resident Visa Sub Class	<input type="checkbox"/> Temporary resident Visa SubClass Number: _____ Visa Expiry Date: _____ Date entered Australia: _____
Date entered Australia: _____	
In which country was the student born? <b>Please provide a copy of Birth Certificate</b>	<input type="checkbox"/> Australia <input type="checkbox"/> Other – please specify -
What school did the student previously attend? (If previously enrolled in Home Education, please specify Education Region)	<b>Name of Previous School:</b>
Has the student ever been suspended from previous school? If YES, please give details.	
<b>Reason for transferring Schools</b>	

**Section 6:****FORM 1 – STUDENT HEALTH CARE SUMMARY****SECTION A**

Students Name:

Date of Birth:

Address:

Gender: Male/ Female

**Immunisation**

It is an enrolment requirement that a **photocopy** of each student's immunisation record is provided to the school.

**Parents are reminded to ensure this has been done.**

The Australian Childhood Immunisation Register (ACIR) records the immunisation history of children up until they turn 7 years old. If parents do not have a copy of their child's early childhood immunisation history they can call ACIR on 1800 653 809, present their Medicare number, and gain access to their child's record. NOTE: This record will not list immunisations the child may have received after turning 7 years of age.

Immunisation certificate/record provided  Yes  No

Medical Practice:  
(Name and Address)

Doctor's name:

Telephone: \_\_\_\_\_

Medicare No.

Expiry date:

Health Care Card No. and Expiry Date:

Dental Practice:

(Name and Address)

Dentist Practice Telephone:

Do you give permission to call the Dentist named in case of an emergency?  Yes  No

**ADMINISTRATION OF MEDICATION**

Written authorisation must be provided for staff to administer any form of medication at school.

**Long term medication** – Complete the *Medication* section of the relevant health care plan – see below.

**Short term medication** - Request an *Administration of Medication* form to complete and return to the principal or class teacher.

**Note:** All medication required must be supplied by parents/carers

Is the student required to take any medications during the course of the school day? *If YES, please supply details of any treatments, care or medication required. (Contact school for relevant forms)*

Yes \_\_\_\_\_  No

**Do you have ambulance cover?**

*If there is a medical emergency, parents/responsible persons are expected to meet the cost of ambulance conveyance.*

Yes  No **If Yes:** Ambulance Cover Insurance Provider \_\_\_\_\_

List any essential information that could affect your child in an emergency e.g. allergy to penicillin.

Do you give permission to call the Doctor named in case of an emergency?  Yes  No

Do you give permission to administer First Aid if required?  Yes  No

**INFORMED CONSENT**

Your child's health care information will be shared with staff on a need to know basis unless otherwise stated.

Do you give permission for the school to share your child's health care information? **Yes**  **No**

**Note:** *If your child is enrolled in a TAFE, PEAC or an alternative education program, this includes the transfer of their health care information to the principal or manager of that program.*

If no, and the information is to be restricted, who can be informed of your child's health care information?

Does your child have one or more health condition(s) that will **require support** from school staff?

No  - Sign below and return Section A of this form to the school office. If your child's requirements change, please notify the school.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## NEW DIAGNOSIS / DIAGNOSIS UPDATE

### Health Care Plan

Student Name: \_\_\_\_\_

DOB: \_\_\_\_\_

Address: \_\_\_\_\_

Gender: Female/ Male

### SECTION B – MEDICAL CONDITION - IN THE FOLLOWING TABLE, PLEASE INDICATE YOUR CHILD'S CONDITION(S) WHICH REQUIRE THE SUPPORT OF SCHOOL STAFF

(In response to the information below, you will be given further forms for specific health conditions to complete)

Does the student have any of the following specified disabilities, medical conditions or intensive health care needs?

(Tick all the boxes that apply)

- |  |  |
|--|--|
| <input type="checkbox"/> Allergies (F2)  | <input type="checkbox"/> Autism Spectrum Disorder (F2) <b>diagnosis &amp; plan required</b>            |
| <input type="checkbox"/> Anaphylaxis (F4) <b>plan required</b>   | <input type="checkbox"/> Deaf or Hard of Hearing (F2) <b>diagnosis &amp; plan required</b>             |
| <input type="checkbox"/> Asthma (F8) <b>plan required</b>  | <input type="checkbox"/> Intellectual Disability (F2) <b>diagnosis &amp; plan required</b>             |
| <input type="checkbox"/> Diabetes (Appropriate Form) <b>plan required</b>  | <input type="checkbox"/> Physical Disability (F2) <b>diagnosis &amp; plan required</b>                 |
| <input type="checkbox"/> Diagnosed migraine/headaches (F2)   | <input type="checkbox"/> Severe Mental Disorder (F2) <b>diagnosis &amp; plan required</b>              |
| <input type="checkbox"/> Hearing condition (e.g. otitis media) (F2) <b>practitioner report required</b>                  | <input type="checkbox"/> Specific Speech Language Impairment (F2) <b>diagnosis &amp; plan required</b> |
| <input type="checkbox"/> Intellectual/learning impairment (e.g. dyslexia) (F2) <b>diagnosis required</b>                 | <input type="checkbox"/> Vision impairment (F2) <b>diagnosis &amp; plan required</b>                   |
| <input type="checkbox"/> Mental health or behavioral issue (F2) <b>diagnosis required</b><br>(e.g. depression, ADD/ADHD) | <input type="checkbox"/> Wears glasses for reading (F2)  |
| <input type="checkbox"/> Seizure Disorder (e.g. epilepsy) (F7) <b>diagnosis &amp; plan required</b>                      |  |

If you have ticked any of the boxes above, please provide further information.

- Please provide **copies of any documentation** which exists in relation to the disability listed. Copies of this documentation are required for school records.
- Please **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.).
- If the student has a medical condition or intensive health care need you will also need to complete a **separate Health Care Authorisation**.

Please provide details of any condition that calls for special steps to be taken

Is there any medical or psychological condition which may require an Emergency Action Plan?

Yes  No 

### SECTION C: CONSENT FOR PHOTO IDENTIFICATION ON YOUR CHILDS HEALTH CARE PLAN

If your child has a condition where an emergency may occur, please indicate whether you give consent for staff to place your child's medical details and photo on view to provide immediate identification.

I give permission for my child's medical details and photo to be on view for staff. Yes  No 

If yes, please attach photo to the relevant health care plan(s).

### SECTION D: MEDIC ALERT INFORMATION

Does your child have a Medic Alert bracelet or pendant? Yes  No 

If yes, provide details:

\_\_\_\_\_

Parent Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_



**Section 7:****Policy Agreements (upon request)****Digital Release Permissions**

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

**I give permission for Southern River College to use images of my child in publications and digital format to promote this College and the Western Australian Department of Education**

**1. Permission granted**

**2. Permission NOT granted**

(NB: Ticking box 2 will mean that your child will not appear in school publications of any nature)

**Laptop and Acceptable Network Usage Policy**

All students at Southern River College must accept responsibility for knowing the contents of the SRC Laptop and Acceptable Network Usage Policy, and must agree to abide by the policy.

**Failure to follow the rules will result in loss of network and device use.**

**We (Parent/Guardian and Student) have read, fully understand and agree to comply with the laptop and acceptable Network usage policy.** Please tick here

**Mobile Phones and Portable Devices Policy**

To ensure that the privacy and security of all people within our College is respected and teaching/learning is not negatively affected by these devices, their use during College hours and College functions must be appropriate and within the guidelines of our policy.

**We (Parent/Guardian and Student) have read, fully understand and agree to comply with the mobile phones and portable devices policy.** Please tick here

**Student Uniform Policy**

Students at SRC are expected to maintain a high level of dress and personal presentation at all times. Parents and students agree to the wearing of the College uniform at all times as a condition of enrolment.

**We (Parent/Guardian and Student) have read, fully understand and agree to comply with the uniform policy.** Please tick here

**Biometrics**

Biometrics will be used to identify students for the College's automated system for attendance (in future this process may be expanded to include the library, café and printing credits). This will necessitate a digital scan of the student's finger print ridges only, which will be stored in encrypted form on our secure server.

**We (Parent/Guardian) fully understand and agree to comply with the Biometrics processes used within Southern River College.** Please tick here

**Smart Rider Permission**

All students at SRC will be issued a Smart Rider card to enable access to concessional fares on Trans Perth, our Library system, and other systems as they come online.

**We (Parent/Guardian and Student) agree to our child being issued a Smart Rider Card that includes an identity photograph.** Please tick here

**Good Standing Policy**

All students at SRC commence the year with the status of Good Standing. This aims to assist students take responsibility for their actions and to encourage them to reach their educational potential.

**We (Parent/Guardian and Student) have read, fully understand and agree to comply with the Good Standing Policy.** Please tick here

**Section 8:**

**Declaration**

**It is your responsibility to notify Southern River College in writing of any changes to the information provided on this enrolment form.**

Name of parent/responsible person enrolling the student and providing consents:

.....  
*(Please print)*

Relationship to student: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: ..... Date: .....

**Acceptance of Enrolment**

Principal

Date \_\_\_\_\_

Deputy Principal

Date \_\_\_\_\_

**OFFICE USE ONLY**

Entry Date:     /     /

Date Transfer Note Sent:     /     /

Previous School: \_\_\_\_\_ Records Received:     YES      NO

Immunisation records provided: YES  NO

Birth certificate sighted:     YES  NO

Proof of Address sighted:     YES  NO

Contact Class: \_\_\_\_\_ House: \_\_\_\_\_

Entered on School Information System by: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Leave Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Destination: Records Sent: \_\_\_\_\_ YES      NO

## Policy Agreements

### Permission to Publish Students Images and Work for School Purposes

Your child's image and/or school work may be published for the above purposes in a range of formats such as hardcopy and digital, including audio and video file formats, and published to a range of media including but not limited to school newsletters, email, school and Department of Education intranet and internet sites including social media websites (e.g. Facebook, YouTube etc.), any third party applications and local newspapers in hardcopy and digital formats, which may enable viewers/readers to identify your child. (complete policy provided).

I give permission for Southern River College to use my child's name, image and work in printed and digital formats to promote this College and the Western Australian Department of Education as indicated in the SRC Permission to Publish policy.

1. Permission granted       2. Permission NOT granted

(NB: Ticking box 2 will mean that your child will not appear in school publications of any nature)

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Student Signature

### Online Services Acceptable Use Agreement

I understand and agree that my child has responsibilities when using the online services provided at school for educational purposes, in accordance with the **Online Services Acceptable Use Agreement** for school students.

- I give permission for my child to have an online services account.  
 I DO NOT give permission for my child to have an online services account.

(NB: Ticking DO NOT will mean that your child will NOT be able to access any ICT devices or the internet in the school and this will impact on their academic performance and completion of online assessments.)

I agree to follow the rules and guidelines in the **Online Services Acceptable Use Agreement** (complete policy provided – please ensure you and your child have read it) for school students at

I understand that if I break any of the rules in the agreement, it may result in disciplinary action, Principal in accordance with the Department's *Behaviour Management in Schools* policy.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Student Signature

## PERMISSION TO PUBLISH STUDENTS IMAGES AND WORK FOR SCHOOL PURPOSES

Dear Parent/Carer

Your permission is sought for the school to publish video or photographic images of your child and/or samples of your child's school work to be used by the school and the Department of Education. The purpose of using the images or work will be activities such as promoting the school, school events and student achievements.

Your child's image and/or school work may be published for the above purposes in a range of formats such as hardcopy and digital, including audio and video file formats, and published to a range of media including but not limited to school newsletters, email, school and Department of Education intranet and internet sites including social media websites (e.g. Facebook, YouTube etc.), any third party applications and local newspapers in hardcopy and digital formats, which may enable viewers/readers to identify your child.

The school will endeavour to limit identifying information that accompanies images of your child or child's work; however there will be occasions when your child's name, class and school may be published along with images.

If you agree to this use of your child's image and school work please complete the consent below. Once signed, the consent will remain effective until such time as you advise the school otherwise.

Mr Dullard (Principal)  
Southern River College

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### PERMISSION (do not detach)

I agree to the videoing or photographing of my child and my child's school work during school activities for use by the school and the Department of Education in the ways stated above.

**IMPORTANT:** I understand that while the school and Department of Education will only publish my child's information for the above-stated purposes, the internet is accessible by any person worldwide. I understand that my child's information can be accessed, copied and used by any other person using the internet (e.g. shared through social media such as Facebook, YouTube, etc.). I understand that once my child's information has been published on the internet the school and Department of Education have no control over its subsequent use and disclosure. I understand that I can withdraw this permission at any time by contacting the school or Department in writing; however, this will not affect materials that have already been published and disseminated.

**Name of student:** \_\_\_\_\_ **Form / Class:** \_\_\_\_\_

**Signature of student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of parent:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# ONLINE SERVICES ACCEPTABLE USE AGREEMENT SOUTHERN RIVER COLLEGE



If you use ICT and the online services of the Department of Education and Training and Southern River College you must agree to the following rules:

I will:

- Not let others use my logon and/or online services account or provide my password to others.
- Only use online services for purposes which support my learning and educational research
- Only use the online accounts approved by staff
- Acknowledge the creator or author of any material used in my research for school work by using appropriate referencing.
- Get permission from the copyright owner of any material used in my school work before I reuse it in a portfolio for employment, in a competition or any other uses other than for my private research and study.
- Follow the SRC Guidelines for Online Discussions by using appropriate and courteous language in all Internet communications.
- Be mindful of the possible problems caused by sharing or transmitting large files online.
- Follow the instructions of teachers and only use ICT and online services for purposes which support my learning and educational research.
- Make sure that any communication (email, DMS in SEQTA) that I send or any work that I wish to have published is polite, carefully written and well presented.
- Not access other people's online services accounts.
- Not attempt to access inappropriate material online or try to access Internet sites that have been blocked by the school or the Department of Education and Training.
- Not damage or disable the computers, computer systems or computer networks of the school, the Department of Education or any other organisation.
- Not reveal personal information, including names, addresses, photographs, credit card details and telephone numbers of myself or others.
- Not use or distribute material from another source unless authorised to do so by the copyright owner.
- Not use the Department's online services for personal gain or illegal activity, to bully, offend or intimidate others or send inappropriate materials including software that may damage computers, data or networks.
- Tell a teacher if I find any information that is inappropriate or makes me feel uncomfortable about it. Examples of inappropriate content include violent, racist, sexist, or pornographic materials, or content that is offensive, disturbing or intimidating or that encourages dangerous or illegal activity.
- Tell my teacher and/or the ICT Technician if I think someone has interfered with or is using my logon and/or online services account.

I understand that:

- I am held responsible for my actions while using my online services account and for any breaches caused by allowing any other person to use my online services account;
- I will be held legally liable for offences committed using online services.
- I must have a USB drive to manage my data.
- The misuse of online services, as monitored by the school and Department of Education, may result in disciplinary action, determined by the principal in accordance with the Department's Behaviour Management in Schools policy; and
- The school and the Department of Education and Training may monitor any information sent or received and can trace activity to the online services accounts of specific users.

I understand that the following activities are NOT allowed:

- Airdrop or Bluetooth
- Distributing multimedia or software
- Downloading software or software updates
- Making purchases online
- Messaging
- Playing preinstalled or online games
- Proxy sites
- Social networking (Facebook, Instagram, Snapchat and YouTube are banned specifically)
- Streaming/Watching music or videos

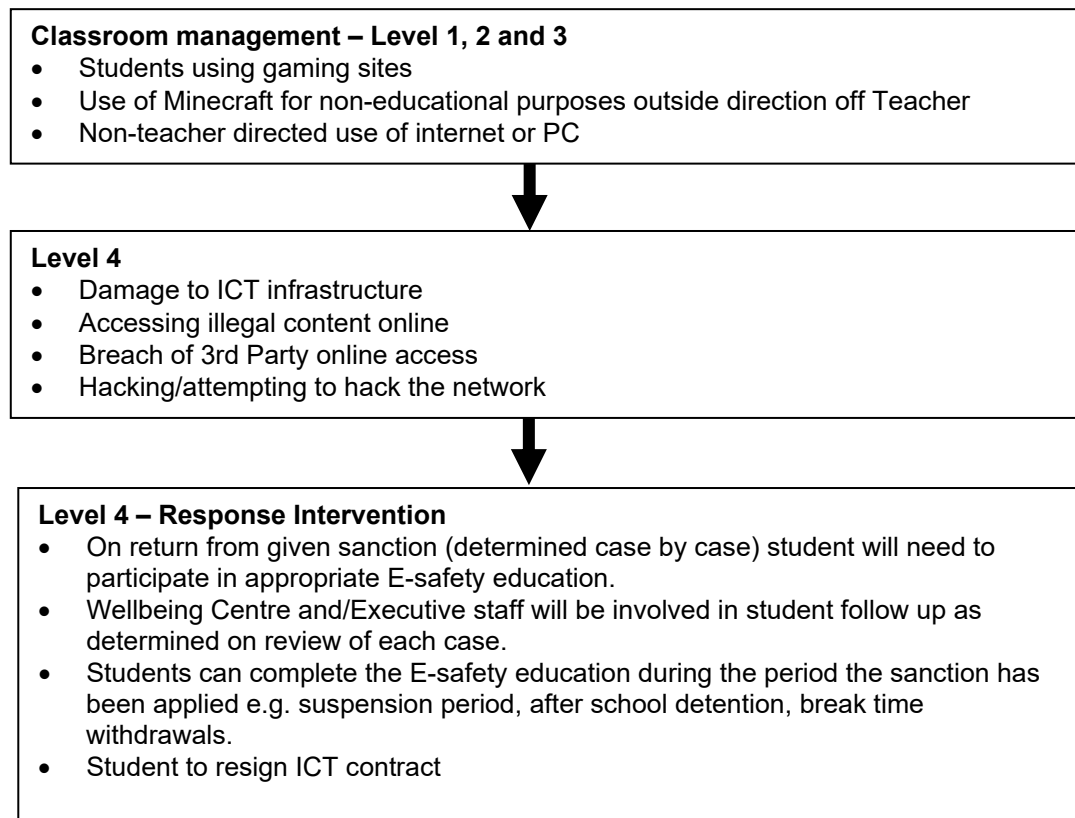
# ONLINE SERVICES ACCEPTABLE USE AGREEMENT

I understand that if I have a personal device that I will:

- Be monitored to ensure appropriate use.
- Be responsible for the device at all times.
- Bring the device to school daily fully charged and functional.
- Follow teacher instructions when using the device at school.
- Have monitoring software installed to monitor appropriate use at school.
- Keep it in a hard cover when not in use.
- Make regular backups of my work.
- Not loan or share my device.
- Not use it during recess or lunch unless I am in a designated area.
- Use the device for only school related activities.
- Ensure an approved antivirus is installed and kept current
- Only access and use applications as directed by my teacher

## BREACH INTERVENTION PROCEDURES

Staff will follow the Positive Behaviour Management flowchart to manage ICT use in the classroom appropriately:



In the event of Cyberbullying staff need to follow the SRC Bullying Policy.  
E-safety Educational resources can be found through SEQTA portal or Shared drive in location [J:\TeacherShare\DepartmentsWell Being Centre \(WBC\)\Resources\IT breach](J:\TeacherShare\DepartmentsWell Being Centre (WBC)\Resources\IT breach)



# PARENT/GUARDIAN AND STUDENT ACKNOWLEDGEMENT & PERMISSION FOR STUDENTS TO HAVE AN ONLINE SERVICES ACCOUNT

## Parent

- I give permission for my child to have an online services account.
- I DO NOT give permission for my child to have an online services account.

I understand and agree that my child has responsibilities when using the online services provided at school for educational purposes, in accordance with the Online Services Acceptable Use Agreement for school students.

Note: While every reasonable effort is made by schools and the Department of Education to prevent student exposure to inappropriate online content when using the Department's Online Services, it is not possible to completely eliminate the risk of such exposure. The Department cannot filter internet content accessed by your child from home or from other locations away from the school. The Department recommends the use of appropriate internet filtering software at home.

## Parent & Student

I agree to follow the rules and guidelines in the **Online Services Acceptable Use Agreement** for school students at Southern River College.

I understand that if I break any of the rules in the agreement, it may result in disciplinary action, determined by the principal in accordance with the Department's *Behaviour Management in Schools* policy.

**Full name of student:** \_\_\_\_\_

**Year:** \_\_\_\_\_

**Student signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent Name:** \_\_\_\_\_

**Parent/Guardian signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



**Public Transport Authority**  
Government of Western Australia



**Transperth**

Dear Parents

**Student Travel Permit**

The Public Transport Authority (PTA) advises that all new secondary students are eligible to receive a Student SmartRider concession card. The Student SmartRider card will be similar in size to a credit card and will be made available for all students throughout the state.

**Parents/guardians should be aware that students will require a Student SmartRider to access concession travel on Transperth, bus, rail and ferry services, and Transwa country road and country rail services.**

In order to issue the cards in the first instance the PTA requires that parents/guardians give their permission for schools to provide student details to the PTA, for the purposes of registering the student for concession travel, and to enable the Student SmartRider to be produced. Only students, who provide parent/guardian permission for the release of these details, will be issued with a card through their school. The information that will be released is student name, date of birth, address and Curriculum Council or student number.

The PTA must comply with the privacy requirements for the public sector and as such will only be using the information provided by the school for the issuance of the Student SmartRider concession card.

**If you wish your child to be issued with a Student SmartRider free of charge through their school, you should sign the attached permission and registration slip and return it to:**

**Southern River College by with your enrollment documents**

If the school does not receive the signed permission slip, your child's student information will not be released to the PTA.

If you do not wish your child to be issued with a Student SmartRider through this process, but your child still requires a Student SmartRider concession card, then you will need to go to a Transperth Information Office and apply for one. You will need to provide proof that your child is enrolled at a school and pay a card fee of \$5.00 for the purchase of the card if you wish to apply for a Student SmartRider in this way.

Please contact your school or the Transperth Info Line on 13 62 13 if you have any further questions.

Yours sincerely

Mark Burgess  
**DIRECTOR TRANSPERTH, REGIONAL AND SCHOOL BUS SERVICES**

**Please return to Southern River College  
with your enrolment documents**

Parent / Legal Guardian Consent for Release of Student Details	
I _____ (given name)	_____ (family name) give
permission for _____ 's (student's full name)	Year Level: _____
<input type="checkbox"/> Student details to be released to the PTA for the purposes of issuing a Student SmartRider card.	
Signature _____	Date _____



