PERMISSION TO PUBLISH WORK/IMAGES OF STUDENTS

Parents/Responsible Persons

We request permission for work and/or images of your child to be taken during school activities and published. Work/images would be used for the purposes of educating students, promoting our school and/or promoting public education.

If you give your permission, we may publish images of your child and/or samples of work done by your child in a variety of ways including, but not limited to, online and printed school newsletters, magazines, reports and other materials; school websites; Department of Education/Government of Western Australia online and printed information; and online and printed external media. If published, third parties would be able to view the photographs and work.

Signing the consent form means you agree to:

- images of your child and samples of your child's work being published as many times as required in the ways mentioned above; and
- your child's first name and surname name being published.

Work/images captured by the school will be kept for no longer than is necessary for the purposes outlined above and will be stored and disposed of securely.

If you agree to permit the school to capture images of your child, publish images of your child and publish samples of your child's work, please complete the consent form below and return it to the school by __________________.

This consent will remain effective until such time as you advise the school otherwise.

CONSENT FORM

I agree to the school capturing images of my child during school activities for use in educating students, promoting the school and promoting public education. I also agree to the publication (electronic and/or print) of images and/or samples of my child's work in a range of ways including, but not limited to, websites, intranet sites, school newsletters (print and online), magazines and the electronic and print external media subject to the conditions set out above.

I will notify the school in writing if I wish to withdraw this consent.

Name of student: ___________________________ Form/Class: _________________________

Signature of student ___________________________ Date: _________________________

Signature of parent/guardian: ___________________________ Date: _________________________
At Roleystone Community College we aim to offer your child the widest range of learning opportunities and celebrate learning whenever possible. This may often require some form of parental consent. This form asks you to consent (or otherwise) to your child’s participation / use / access to several aspects of the school program. At all times we make the very best efforts to exercise exemplary standards in respect to duty of care.

**INTERNET ACCESS**
The Internet can provide students with valuable learning experiences. Students that break the Internet Conditions of Use will be subject to appropriate action by the school. **The Internet will only be used for educational purposes.** Any sites that are illegal, dangerous or offensive that appear on the screen must be reported immediately to a teacher.

☐ Yes, my child has permission to access the Internet in accordance with school policy.

☐ No, I do not give consent.

**VIEWING CONSENT**
Students often watch videos / DVDs / television documentaries as part of their learning. Almost always these are ‘G’ rated and don’t require consent. Very occasionally something with a ‘PG’ rating is deemed appropriate by teachers and school administration for which we need parental permission.

☐ Yes, I consent to my child viewing items with a ‘PG’ rating if deemed suitable by the teacher and school administration.

☐ No, I do not give consent.

**NEWSLETTER**
Would you like the Newsletter emailed ☐ Yes ☐ No

Email Address ________________________________

Child’s full name _____________________________ Room ______

Date _____ / ____ / ______

Parent/Caregiver’s name ___________________ Parent/Caregiver’s signature ____________________

**PLEASE TURN OVER**