

Parent/Student Consent Form – Innisfail State College

Privacy Notice

The Department of Education is collecting personal information about the student in this form for the purpose of recording consent for participation in one-on-one meetings with the school's chaplain or student welfare workers. This form will be stored securely at school and only be accessed by the Chaplain & Student Welfare Workers, the school's student support team and the Principal. The personal information collected here will not otherwise be used or disclosed unless you consent, or the use or disclosure is authorised by law.

Innisfail State College provides a Chaplaincy service, which is approved by the school's Parents & Citizens' Association and is available to all students. The Chaplain is employed through Scripture Union Queensland. Chaplains and student welfare workers provide social, emotional and spiritual support to students and the school community and are inclusive of and show respect for all religious and non-religious beliefs and other stances represented in the school community.

Information about the school's Chaplain is available on the school's website, through newsletters or by contacting the college. Further information about the chaplaincy and student welfare worker program, including definitions, is located on the department's website at https://education.qld.gov.au/student-support-services/chaplaincy-student-welfare-worker-services.

To utilise this service for your student, your written informed consent is required. The focus of these meetings, which may occur during lesson time or within the broader school day, will be determined by the student's needs, however chaplains and student welfare workers are not allowed to provide counselling. If a referral to an external agency or service is required, the Chaplain must have the approval of the principal, deputy principal or guidance officer and your consent.

The meetings with the Chaplain are confidential and the Chaplain may record what happened or was said during the meetings. These notes will be securely stored at the school and may be viewed by the student, if requested.

There may be times when the Chaplain is required to disclose confidential information provided by the student to the principal. The principal may be required to inform you, the Queensland Police Service and/or Child Safety Services. This would happen if:

- a person is at risk of harm, or being harmed;
- the student plans to, or is harming themselves; the student has harmed, or is planning to harm, another person; or a law has been broken.

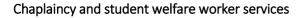
Consent provided on this form will be considered valid for the duration of the student's enrolment at Innisfail State College. Consent provided may be withdrawn at any time by notifying the school principal in writing or by completing and submitting another Chaplaincy and student welfare worker services parent/student consent form. The reason the student accesses this support service, and the outcome of any consultation with them, will not be disclosed without your consent, unless required by law.

Please complete the attached form indicating whether you consent to your student being provided support from the Chaplain and return to the school office or email principal@innisfailsc.eq.edu.au.

If you would like to discuss this matter you may wish to contact the school Chaplain directly or myself at the college on 07 4078 0222, alternatively I can be contacted via email at principal@innisfailsc.eq.edu.au.

Yours sincerely

Tanya Martin - Principal



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Please complete, sign and return this form to the school office or email it to principal@innisfailsc.eq.edu.au

Student Name:			DOB:		
Please indicate whether you consent to your student accessing the school chaplain and any associated activities. Consent provided may be withdrawn at any time by notifying the school principal in writing or by completing and submitting another Chaplaincy and student welfare worker services parent/student consent form.					
 I <u>CONSENT</u> for my student to receive support from the School Chaplain and participate in any associated activities. I <u>DO NOT CONSENT</u> for my student to receive support from the School Chaplain and participate 					
in any associated activities.					
Parent/Guardian or Student Signature:					
Please print name					
Office Use:					
Retain original in the student's file and provide a copy of notice to the chaplain/student welfare worker.					
Does the student/parent require an interpreter?	Yes	Has an interpreter been used to explain this information?	Yes	The principal has determined that the student has the capacity to make an informed decision about their participation in ongoing one-on-one meetings with the chaplain/student welfare worker.	Yes