



LEINSTER
COMMUNITY SCHOOL

Leinster Community School

Year of enrolment:

- Year 7
- Year 8
- Year 9
- Year 10
- Year 11
- Year 12

STUDENT ENROLMENT FORM

(For enrolment in a Western Australian Public School)

STUDENT DETAILS

Surname: _____ Legal Surname (if different): _____

Previous Surname (if applicable): _____

First Name: _____ Second Name: _____ Third Name: _____

Preferred First Name: _____

Email Address: _____

Date of Birth: ____/____/____ (dd/mm/yy) Original Birth Certificate: Sex: Male Female

Residential Address: _____

Postcode: _____

Telephone (Home): _____ Student's Mobile (if applicable): _____

Car Registration (if applicable): _____ Student's Religion (if applicable): _____

Is the student to be withdrawn from religious instruction? YES NO

Is the student of Aboriginal or Torres Strait Islander origin? Aboriginal YES NO

.....Torres Strait Islander (TSI) YES NO

.....Both Aboriginal and TSI YES NO

Does the student speak a language other than English at home? (If more than one language, indicate the one that is spoken most often.)

- NO, English only
- YES, Aboriginal English
- YES, other - please specify: _____

What was the first language spoken at home? _____

Does the student mainly speak English at home..... YES NO

SIBLING DETAILS

Full name/s of brothers and sisters attending this school:

Student lives with:

- Both Parents
- Parent/Guardian/Carer 1
- Parent/Guardian/Carer 2
- Independent Minor
- Adult Student

Other.....

Name	Relationship to student
_____	_____

(Reg3. School Education Regulations 2000)

For information on access restriction, see *Confidential Information* section of this form.

EVIDENCE OF IMMUNISATION STATUS

Please provide a copy of the student's immunisation statement. This is either:

- an Australian Immunisation Register (AIR) Immunisation History Statement not more than two months old, or
- a valid Immunisation Certificate issued by the Department of Health.

The student's Australian Immunisation Register (AIR) Immunisation History Statement shows the immunisation status is:

- Up to date
- Not up to date
- The student has an Immunisation Certificate issued by the Chief Health Officer.

Copy provided: YES NO

You will find the 'Immunisation status' at the top of the Australian Immunisation Register (AIR) Immunisation History Statement, under the date of birth. Please note, the following immunisation evidence is no longer acceptable: a child health record, for example the Purple Book.

RESIDENCY STATUS

Nationality (*optional*): _____ Country of Birth: _____

Is the student an Australian Citizen? YES NO

If NO, is the student a permanent resident of Australia? YES NO

If YES, Date of Arrival in Australia: //

Visa Sub-class No: _____

Visa Expiry Date (*if applicable*): //

International Fee Paying (*if known*): YES NO

PREVIOUS SCHOOL

Previous School: _____

Reason for change of school (*optional*): _____

If previously enrolled in Home Education, specify the Education Region: _____

Movement reason (optional): _____

CONFIDENTIAL INFORMATION

Is this student subject to any court orders in respect of their care, welfare and development or access restrictions? YES NO

If YES, please specify and attach supporting documentation:

Supporting documentation attached YES NO

Does the family or student have a Health Care Card (if applicable): YES NO

If YES, please provide card number: _____ Expiry Date: ____/____/____ (dd/mm/yy)

Is this student in the care of Director General of the Department of Communities – Child Protection and Family Support (CPFS)?

..... YES NO

If YES, please specify the name of the CPFS Case Manager, their CPFS District and their contact phone number below:

Name: _____ District: _____ Contact Number: _____

Does the student receive any of the following allowances? (Check the boxes that apply)

- | | |
|---|--|
| <input type="checkbox"/> Secondary Assistance | <input type="checkbox"/> Youth Allowance |
| <input type="checkbox"/> Assistance for Isolated Children (AIC) | <input type="checkbox"/> Abstudy |

CONSENT FORMS

Parent consent is sought in **ATTACHMENT 2** for a variety of school related activities.

HEALTH

In addition to the information below, a separate Student Health Care Summary form available from the school, is to be completed for all students identified as having health conditions requiring support at school, additional form/s will be provided by the school.

Do you require a Student Health Care Summary form?..... YES NO

DISABILITY

Does the student have a disability? YES NO

If YES, please specify:

Please indicate where you have documentation about your child's disability in any of the following areas. Copies of this documentation will be required for school records:

- | | |
|--|--|
| <input type="checkbox"/> Autism Spectrum Disorder | <input type="checkbox"/> Severe Mental Disorder |
| <input type="checkbox"/> Deaf or Hard of Hearing | <input type="checkbox"/> Global Developmental Delay (prior to age 6) |
| <input type="checkbox"/> Specific Speech Language Impairment | <input type="checkbox"/> Vision Impairment |
| <input type="checkbox"/> Intellectual Disability | <input type="checkbox"/> Physical Disability |

MEDICAL

Does the student have a medical condition or intensive health care need? YES NO

If YES, please specify:

- | | |
|---|---|
| <input type="checkbox"/> Allergy – Anaphylaxis | <input type="checkbox"/> Hearing condition (eg Otitis Media) |
| <input type="checkbox"/> Allergy – Other _____ | <input type="checkbox"/> Mental health or behavioural (eg Depression, ADHD) |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Intensive Health Care Need (eg tube feeding) |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Diagnosed migraine/headaches | |
| <input type="checkbox"/> Seizure Disorder (eg Epilepsy) | |

Medical Practice (Name and Address): _____

Doctor's Name: _____ Telephone: _____

Dental Surgery Practice (Name and Address): _____

Dentist's Name: _____ Telephone: _____

Medicare No: _____ Valid to: ____ / _____ Copy provided: YES NO

Health Care Card (if applicable): YES NO Member no. _____ Expiry Date: _____

Do you have ambulance cover? YES NO

Note: If there is a medical emergency parents or guardians are expected to meet the cost of the ambulance.

PARENT / CARER 1 DETAILS

Title: _____ First Name: _____ Second Name: _____

Surname: _____ Relationship to Student: _____

Date of Birth: ____/____/____ (dd/mm/yy) Sex: Male Female

Postal Address (if different from student residential address): _____

Postcode: _____

Telephone (Home): _____ Mobile Number: _____

Email Address: _____

Occupation/Workplace: _____ Location: _____

Telephone (Work): _____ Mobile Number (Work): _____

Please indicate if Parent/Carer 1 has the:

Day to day care of the student **or** Long term care of student.

Please indicate if Parent/Carer 1 is responsible for the fees and charges billing charges:

YES NO If NO, who is responsible: _____

Does Parent/Carer 1 speak a language other than English at home?

NO, English only YES, other - please specify:

If more than one language, indicate the one that is spoken most often. _____

What is the highest year of primary or secondary school Parent/Carer 1 has completed?

- Year 12 or equivalent
 Year 11 or equivalent
 Year 10 or equivalent
 Year 9 or equivalent or below

What is the level of the highest qualification Parent/Carer 1 has completed?

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

Note: If you did not attend school, mark 'Year 9 or equivalent or below.'

What is the occupation group for Parent/Carer 1?

- Group 1 (*Senior Management in large business organisation, government administration and defence, 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.*)

Refer to **ATTACHMENT 1** 'Parent Occupation Groupings' for more information regarding the categories.

If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation.

However, if you have not been in paid work in the last 12 months, enter '8'.

PARENT / CARER 2 DETAILS

Title: _____ First Name: _____ Second Name: _____

Surname: _____ Relationship to Student: _____

Date of Birth: ____/____/____ (dd/mm/yy) Sex: Male Female

Postal Address (if different from student residential address): _____

Postcode: _____

Telephone (Home): _____ Mobile Number: _____

Email Address: _____

Occupation/Workplace: _____ Location: _____

Telephone (Work): _____ Mobile Number (Work): _____

Please indicate if Parent/Carer 2 has the:

Day to day care of the student **or** Long term care of student.

Please indicate if Parent/Carer 2 is responsible for the fees and charges billing charges:

YES NO If NO, who is responsible: _____

Does Parent/Carer 2 speak a language other than English at home?

NO, English only YES, other - please specify:

If more than one language, indicate the one that is spoken most often. _____

What is the highest year of primary or secondary school Parent/Carer 2 has completed?

- Year 12 or equivalent
- Year 11 or equivalent
- Year 10 or equivalent
- Year 9 or equivalent or below

What is the level of the highest qualification Parent/Carer 2 has completed?

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

Note: If you did not attend school, mark 'Year 9 or equivalent or below.'

What is the occupation group for Parent/Carer 2?

- Group 1 (*Senior Management in large business organisation, government administration and defence, 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.*)

Refer to **ATTACHMENT 1** 'Parent Occupation Groupings' for more information regarding the categories.

If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. However, if you have not been in paid work in the last 12 months, enter '8'.

OTHER FAMILY DETAILS

If applicable, please talk to your school about:

- Arrangements of the payment of contributions or charges; *and*
- Distribution of information, including student reports and newsletters.

EMERGENCY CONTACT DETAILS

Please provide contact details in order of preference or people residing in the township of Leinster who may be contacted in an emergency if Parent/Carer 1 and Parent/Carer 2 are uncontactable.

We require the contact details for at least three emergency contacts to be listed below:

Emergency Contact 1:

Title: _____ First Name: _____ Surname: _____

Relationship to Student: _____

Telephone (Home): _____ Mobile No: _____

Emergency Contact 2:

Title: _____ First Name: _____ Surname: _____

Relationship to Student: _____

Telephone (Home): _____ Mobile No: _____

Emergency Contact 3:

Title: _____ First Name: _____ Surname: _____

Relationship to Student: _____

Telephone (Home): _____ Mobile No: _____

Emergency Contact 4:

Title: _____ First Name: _____ Surname: _____

Relationship to Student: _____

Telephone (Home): _____ Mobile No: _____

Emergency Contact 5:

Title: _____ First Name: _____ Surname: _____

Relationship to Student: _____

Telephone (Home): _____ Mobile No: _____

PRIVACY AND DECLARATION

Please tick to confirm:

I understand:

- That the student's enrolment information is confidential and will be kept as required by the Department of Education's record keeping procedures.
- That information on the Enrolment Form will be used to meet the Department of Education's reporting requirements to other Government departments or agencies. This includes providing the Department of Health with my child's immunisation status as requested.

I declare:

- This is the only enrolment I have made for this student.
- I understand that I am required to notify the school as soon as any of the enrolment details for the student change.
- I understand that if I provide false or misleading information the student's enrolment may be reconsidered or cancelled.
- I have provided all documentation available to me.

Name of person enrolling student:

Title: _____ First Name: _____ Surname: _____

Relationship to Student: _____

Signature: _____ Date: _____

(Independent minors and those aged 18 years or older may sign on their own behalf.)

PRINCIPAL'S APPROVAL

Principal's signature
Approved / Not approved
Date: _____

Parent Occupation Groups

Relates to questions in Parent 1 and Parent 2 sections of the Application for Enrolment form.

GROUP 1	GROUP 2	GROUP 3	GROUP 4
<p>Senior management in large business organisation government administration & defence, and qualified professionals</p> <p>Senior executive/ manager/ department head in industry, commerce, media or other large organisation.</p> <p>Public service manager (section head or above), regional director, health/education/police/ fire services administrator.</p> <p>Other administrator [school Principal, faculty head/clean, library/museum/gallery director, research facility director].</p> <p>Defence Forces Commissioned Officer.</p> <p>Professionals generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; identify, treat and advise on problems; and teach others.</p> <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing professional.</p> <p>Business [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer].</p> <p>Air/sea transport [aircraft/ships captain/officer/pilot, flight officer, flying instructor, air traffic controller].</p>	<p>Other business managers, arts/media/sportspersons and associate professionals</p> <p>Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business.</p> <p>Specialist manager [finance/engineering/production / personnel/ industrial relations/ sales/marketing].</p> <p>Financial services manager [bank branch manager, finance/ investment/insurance broker, credit/loans officer].</p> <p>Retail sales/services manager [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency].</p> <p>Arts/media/sports [musician, actor, dancer, painter, potter, sculptor, journalist, author].</p> <p>media presenter, photographer, designer, illustrator, proof reader, sportsman/ woman, coach, trainer, sports official].</p> <p>Associate professionals generally have diploma/technical qualifications and support managers and professionals.</p> <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing technician/associate professional.</p> <p>Business/administration [recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager].</p> <p>Defence Forces senior Non-Commissioned Officer.</p>	<p>Tradesmen/women, clerks and skilled office, sales and service staff</p> <p>Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.</p> <p>Clerks [bookkeeper, bank/PO clerk, statistical/actuarial clerk, accounting/claims/audit clerk, payroll clerk, recording/registry/filing clerk, betting clerk, stores/ inventory clerk, purchasing/order clerk, freight/transport/shipping clerk, bond clerk, customs agent/customer services clerk, admissions clerk].</p> <p>Skilled office, sales and service staff</p> <p>Office [secretary, personal assistant, desktop publishing operator, switchboard operator].</p> <p>Sales [company sales representative, auctioneer, insurance agent/ assessor/loss adjuster, market researcher].</p> <p>Service [aged/disabled/refugee/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor].</p>	<p>Machine operators, hospitality staff, assistants, labourers and related workers</p> <p>Drivers, mobile plant, production/ processing machinery and other machinery operators</p> <p>Hospitality staff [hotel service supervisor, receptionist, waiter, bar attendant, kitchenhand, porter, housekeeper].</p> <p>Office assistants, sales assistants and other assistants</p> <p>Office [typist, word processing/data entry/business machine operator, receptionist, office assistant].</p> <p>Sales [sales assistant, motor vehicle/caravan/parts salesperson, checkout operator, cashier, bus/train conductor, ticket seller, service station attendant, car rental desk staff, street vendor, telemarketer, shelf stacker].</p> <p>Assistant/aide [trades' assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant].</p> <p>Labourers and related workers</p> <p>Defence Forces ranks below senior NCO not included in other groups.</p> <p>Agriculture, horticulture, forestry, fishing, mining worker [farm overseer, shearer, wool/hide classer, farmhand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand].</p> <p>Other worker [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor].</p>

These categories have been determined nationally and are designed as broad occupational groupings. All Australian states and territories use the same categories.

CONSENT FORM

At Leinster Community School 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 of duty of care.

LOCAL EXCURSIONS CONSENT

Children occasionally walk within the local area for minor excursions under the supervision of the teacher and attend activities such as visiting local parks, Town Hall, Town Oval, local swimming pool or the shopping centre.

- Yes, I consent to my child participating in teacher supervised local excursions which may involve short walks to and from the school.
- No, I do not give consent.

INTERNET ACCESS CONSENT

Student access to the Internet is provided in accordance with the school policy, available from the office. Student access is contingent on abiding by the Student Code of Conduct.

- Yes, my child has permission to access the Internet in accordance with school policy.
- No, I do not give consent.

In addition, you will be provided with Third Party Consent forms for your child's year level in regards to sites and apps that they may access.

Name of student: _____ Year/Class/Room: _____

Name of person signing the consent form:

Title: ____ First Name: _____ Second Name: _____ Surname: _____

Signature: _____

Please indicate relationship to the student: _____

APPENDIX F. PERMISSION TO PUBLISH STUDENTS IMAGES AND WORK FOR SCHOOL PURPOSES

Dear Parent and Guardian,

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 and return this whole permission form to the office of Leinster Community School. Once signed, the consent will remain effective until such time as you advise the school otherwise.

Leanne Kelleher
Principal
Leinster Community School

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:** _____

Note: This consent form should be filed by the school and a copy provided to the parent.

OFFICE USE ONLY

Student's official documentation all sighted (Date): _____ YES NO

Birth certificate Passport Travel document/s Medicare Card

Student's Residency status: Local Permanent Resident

Overseas Student: If yes, International fee paying: YES NO

Entry Date: _____

Previous School: _____ Records received: YES NO

Publications/Internet Permission Form completed: YES NO

Contributions and Charges Billing: PG1: ____% PG2: ____% Other: ____%

Official documentation: PG1: ____ PG2: ____ Other: _____

(including reports, to be sent to)

Immunisation records provided: YES NO

Form/Class: _____ House Faction: _____

Approved by Principal: NO YES on (Date): _____

Entered on School Information system by: _____ on (Date): _____

Student leaves school: (Date) _____ Date Transfer Note Sent: _____

Destination: _____

Records received from transferring school: NO YES on (Date): _____

RETENTION AND TRANSFER OF STUDENT ENROLMENT RECORDS:

- 1. Enrolment Applications (successful) – The School to retain for 5 years after last action and then destroy.**
- 2. Enrolment Applications (unsuccessful) – The School to retain for 2 years after last action and then destroy.**
- 3. Enrolment Register (Register of Admissions/Enrolment Cards used prior to the School Information System) – The School to retain for 7 years after last action and then archive and transfer to State Records Office only when advised by Corporate Information Services.**
- 4. Enrolment Records (managed in the School Information System) – The School must print out annually for all school leavers, the School must retain for 7 years after the last action and then archive and transfer to State Records Office only when advised by Corporate Information Services.**
- 5. Student files – The School must negotiate with the previous school at the local level the transfer within 5 school days.**

Leinster Community School



LEINSTER
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Y7-Y12 Third Party Consent Form

IMPORTANT NOTE: Due to the Education Department Policy, your child will not be able to access any of these programs until this form has been signed and returned.

Y3-Y6 consent to disclose personal information to third party services. The following third party services are being used in our school. These services require us to share some personal information about your child and require you to provide consent for each service before we do so. It is important to note that this consent form is in relation to a phase of learning (7-12) and not all third party services will be used in your child's classroom in any one year. These online services allow the school to effectively manage the complex operations of a large organisation and provide children with a range of contemporary learning opportunities aligned with the Western Australian Curriculum.

Name of Service (Classroom)	Consent	Name of Service (Classroom)	Consent	Name of Service (Administrative)	Consent
Noteflight	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent	Garageband	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent	ACER- Australian Council for Educational Research	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent
Mathletics	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent			Datahub – Student Assessment	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent
Seesaw – Digital Learning Portfolio	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent			Passtab – Visitor Management System	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent
Stile	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent			School Stream	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent
JacPLUS	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent			Jamf	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent
Education Perfect	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent			Google Education	<input type="checkbox"/> Consent <input type="checkbox"/> Do not Consent

I have read the terms of use and privacy policy for each of the websites listed. I understand that my child's personal information, as described above, will be provided to these third party service providers for the purpose of my child's education and that this information may be stored outside of Australia.

Parent/Guardian Name:	Student Name:
Date:	Student Year Level:
Signed:	

Y7-Y12 Third Party Services Information

Name of Service	Type of service	What do I need to know	Further information
Name Noteflight Learn (Education Plan Only) https://www.noteflight.com/	Category Music	Information provided: Teacher name and email, school, classes, student username (as created by teacher) and password. How the information is used: Enables the teacher to create a private website for students where all users have Noteflight Premium features, including recording, performance and assessment tools. Where the information is stored: Outside Australia but certified by Australian Signals Directory.	Terms of Use / Privacy Policy https://noteflight.com/legal/terms http://noteflight.com/legal/privacy
Name Mathletics https://www.mathletics.com/au/	Category Mathematics Teaching and learning	Information provided: Student name, school, student email, student password, class details, student work and student performance. How the information is used: Provides students with access to online maths learning tool and online maths competitions. Where the information is stored: Outside Australia.	Terms of Use / Privacy Policy http://www.3plearning.com/privacy/ https://www.3plearning.com/terms/
Name Seesaw https://web.seesaw.me	Category Teaching and learning Communication	Information provided: Student name, student email, school, class details, school year, student work including photos and videos. How the information is used: Seesaw is a protected online portfolio and communication platform that engages students and parents in the child's learning journey, providing a platform for reflection and collaboration. Where the information is stored: Australia.	Terms of Use / Privacy Policy https://web.seesaw.me/privacy-policy https://web.seesaw.me/terms-of-service
Name Stile https://stileeducation.com/	Category References & Resources Interactive science	Information provided: Student name (optional), student email (optional), school, class details, student work, attendance (optional), grades or performance (optional) and videos (optional). How the information is used: This service provides science lessons for use in year 7-10 classrooms. Where the information is stored: Within Australia.	Terms of Use / Privacy Policy https://stileeducation.com/privacy https://stileeducation.com/security
Name JacPLUS https://www.jacplus.com.au/	Category Teaching and Learning References & Resources	Information provided: Staff/teacher: name, email. Student: name, email, photos or videos, grades or performance data. Other data: school. How the information is used: Digital bookshelf for accessing all Jacaranda digital resources including core curriculum titles. Where the information is stored: Within Australia.	Terms of Use / Privacy Policy https://www.jacplus.com.au/jsp/general-nav/terms/terms.jsp https://www.jacplus.com.au/jsp/general-nav/copyright/privacy_policy.jsp
Name Education Perfect https://www.educationperfect.com	Category Teaching and learning References and resources	Information provided: Student name, student email, school, phone number, class details, school year, student work, grades or performance and videos. How the information is used: Enables students to access an online learning and assessment platform with differentiated learning experiences. There is the option to enrol in world series competitions against other students. Where the information is stored: Within Australia.	Terms of Use / Privacy Policy https://www.educationperfect.com/legal/ https://www.educationperfect.com/wp-content/uploads/2020/11/Education-Perfect-Terms-of-Use-2020-04-14.pdf
Name Apple https://www.apple.com/au (Garageband)	Category Teaching and Learning	Information provided: Staff/teacher: name, email. Student: name, email, work/content, photos or videos, grades or performance data. Other data: school, class details, school year, student username How the information is used: Includes Apple School Manager, pre-loaded applications and additional modules on a Managed Apple ID. Where the information is stored: Outside Australia	Terms of Use / Privacy Policy https://www.apple.com/au/privacy/ https://school.apple.com
Name PAT (ACER) https://www.acer.org/au/pat	Category Assessment and Testing	Information provided: Staff/teacher: name, email. Student: name, date of birth, work/content, gender, grades or performance data, other data. Parent: name, contact information How the information is used: Tests to provide objective, norm-referenced information about students' skills and understandings in a range of key areas. Where the information is stored: Within Australia.	Terms of Use / Privacy Policy https://www.acer.org/privacy https://www.acer.org/online-terms-of-use

<p>Name Datahub https://bestperformance.com.au/products/data-hub/</p>	<p>Category Assessment Teaching and Learning</p>	<p>Information provided: Staff email, school, student name, date of birth, address, class details, school year, student test results, attendance (optional), behaviour (optional), profile or other photos (optional), gender, medical or health (optional) and grades or performance. How the information is used: Uses standardised tests, participation levels and other factors to develop data driven student improvement strategies and target weaknesses in progression. Where the information is stored: Within Australia.</p>	<p>Terms of Use / Privacy Policy https://bestperformance.com.au/privacy-policy/</p>
<p>Name Passtab https://passtab.com</p>	<p>Category Student and visitor management.</p>	<p>Information provided: Student name, student email, date of birth, school, class details, school year, attendance, profile or other photos and medical or health appointment details as shared by parent or caregiver at sign in/out. How the information is used: Passtab is a visitor and student management solution for primary, secondary and private schools. Where the information is stored: Australia.</p>	<p>Terms of Use / Privacy Policy https://passtab.com/privacy.html</p>
<p>Name School Stream https://www.schoolstream.com.au</p>	<p>Category School Communication</p>	<p>Information provided: Student name, student email, date of birth, school, class details, school year, parent email and mobile. How the information is used: This service provides a school communication system. Where the information is stored: Within Australia.</p>	<p>Terms of Use / Privacy Policy https://www.schoolstream.com.au/privacy/ https://www.schoolstream.com.au/service-terms/</p>
<p>Name Jamf School https://www.jamf.com/products/jamf-school/</p>	<p>Category Apple mobile device Management</p>	<p>Information provided: Staff/teacher: name, email and personal information. Student: name and email. How the information is used: Apple Mobile Device Management. Where the information is stored: Outside Australia.</p>	<p>Terms of Use / Privacy Policy https://www.jamf.com/privacy/ https://www.jamf.com/terms-of-use/</p>
<p>Name: Google Education https://edu.google.com/</p>	<p>Category: Teaching and Learning</p>	<p>Information provided: Student name, school, student email and class details. How the information is used: Google for Education tools work together to transform teaching and learning so that every student and educator can pursue their personal potential. Where the information is stored: Europe.</p>	<p>Terms of Use / Privacy Policy: https://edu.google.com/intl/ALL_au/why-google/privacy-security/ https://policies.google.com/privacy?hl=en</p>

Students Online in Public Schools Procedures

All policy and procedural statements contained within this document are lawful orders for the purposes of section 80(a) of the Public Sector Management Act 1994 (WA) and are therefore to be observed by all Department of Education employees.



APPENDIX A. STUDENT ACCEPTABLE USE OF TECHNOLOGY AGREEMENT (YEARS 7-12)



LEINSTER
COMMUNITY SCHOOL

Our school provides access to Department of Education online services. These enhance the contemporary learning opportunities available to students and the range of teaching tools available to staff to deliver the Western Australian Curriculum.

I am writing to seek approval for your child to be given access to these online services.

The Department's online services currently provide students with access to:

- individual email and calendar accounts;
- the internet, with all reasonable care taken by central office and schools to monitor and control students' access to websites while at school;
- online teaching and learning services such as Connect, web-conferencing and digital resources;
- online file storage and sharing services; and
- these online services at locations other than school.

If you agree to your child using these online services, please sign the Acceptable Use Agreement form and complete the permission slip attached to this letter. Please explain the content of the Acceptable Use Agreement to your child before the permission slip is signed.

Both forms should be returned to school so that an online services account can be created for your child.

Please note that while every reasonable effort is made by schools and the Department to prevent student exposure to inappropriate online content when using Department provided online services, it is not possible to completely eliminate the risk of such exposure.

You should be aware that the Department has the right to review, audit, intercept, access and disclose messages created, received or sent over Department online services. Logs of email transactions and internet access data are kept for administrative, legal and security purposes and may be monitored. Similar to other corporate records, emails and internet access records are discoverable in the event of legal action and are subject to provisions of the Freedom of Information Act 1992. (www.foi.wa.gov.au)

You should also be aware that general internet browsing not conducted via the Department's network is not monitored or filtered by the Department. The Department encourages close family supervision of all internet use by children in locations other than school, and strongly recommends the use of appropriate internet filtering software. Advice on managing internet use at home can found on the Office of the E-Safety Commissioner website (www.esafety.gov.au/iparent).

Yours sincerely,

Leanne Kelleher
Principal
Leinster Community School

APPENDIX B. PERMISSION FOR STUDENTS TO HAVE AN ONLINE SERVICES ACCOUNT

Student's first name: _____

Student's last name: _____

School: _____

Class / Form / Room: _____

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 Acceptable Use Agreement for school students.

I also understand that if my child breaks any of the rules in the agreement that the principal may take disciplinary action in accordance with the Department's Student Behaviour Policy and Procedures.

Name of parent: _____

Signature of parent: _____ Date: _____

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.

Office use only:

Processed on: / / by (initials):

Note: This agreement should be filed by the school.

APPENDIX E. ONLINE SERVICES ACCEPTABLE USE AGREEMENT (YEARS 7-12)

I agree to follow the rules set out below when I use the Department-provided online services:

- I will only use online services for purposes which support my learning and educational research.
- I understand that I am responsible for all activity in my online services account.
- I will check with the teacher before sharing images or giving information about myself or anyone else when using online services.
- I will keep my password private and not share with other students.
- I will not let other people logon and/or use my online account.
- I will tell the teacher if I think someone is using my online account.
- I understand the school and the Department of Education can monitor my use of online services.
- If I find any information that is inappropriate or makes me feel uncomfortable I will tell a teacher about it. Examples of inappropriate content include violent, racist, sexist, or pornographic material, or content that is offensive, intimidating or encourages dangerous or illegal activity.
- I will not use the Department's online services for personal gain or illegal activity (e.g. music file sharing), to bully, offend or intimidate others or access or send inappropriate materials including software that may damage computers, data or networks.
- I will acknowledge the creator or author of any material used in my research for school work by using appropriate referencing.
- I will 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.
- I will use appropriate language in all internet communications.
- I will not try to access internet sites that have been blocked by the school or the Department of Education.
- I will not damage or disable the computers, computer systems or computer networks of the school, the Department of Education or any other organisation.

I understand that:

- I will be held responsible for my actions while using online services and for any breaches caused by allowing any other person to use my online services account;
- the misuse of online services may result in disciplinary action, determined by the principal in accordance with the Department's *Behaviour Management in Schools* policy; and
- I may be held liable for offences committed using online services.
-

Name of student: _____

Signature of parent: _____

Date: _____

Office use only:

Processed on: / / by (initials):

Note: *This agreement should be filed by the school and a copy kept by the student.*



LEINSTER

COMMUNITY SCHOOL

01 December 2023

2024 SCHOOL COSTS

Dear Parents and Guardians,

The Leinster Community School Board has endorsed the schedule of Contributions and Charges for 2024. The schedule is broken into four sections and will allow you to calculate all costs that may be incurred throughout the school year.

1. Contributions

The total amount of contributions parents/caregivers are being asked to pay has been set in line with the School Education Regulations 2000. For Kindy to Year 6 students \$60, for Year 7 to 10 students \$176.25, and a compulsory fee for Year 11-12 students, \$235, which is collected through School of Isolated and Distance Education.

Money collected will be used to supplement school expenditure in the curriculum learning areas. Your contribution will be used to supplement school funding for the purchase of resources needed in the provision of the learning program activities.

The table below gives you the breakdown of where we will direct your voluntary contribution to.

Early Childhood		Primary		Y7-Y10	
Literacy Resources	\$20	English Resources	\$20	English Resources	\$44
Mathematics, Science & Health	\$20	Mathematics resources	\$10	Mathematics Resources	\$44
Art, Craft and Cooking	\$15	Other Learning areas: Science, HASS, LOTE and PE	\$10	Science,	\$44.25
ICT Resources	\$5	Arts Resources including Music, Drama, Visual Arts	\$10	Visual Arts, LOTE and PE	\$44
		ICT Resources	\$10		
TOTAL CONTRIBUTION	\$60	TOTAL CONTRIBUTION	\$60	TOTAL CONTRIBUTION	\$176.25

All contributions are used for the direct benefit of the students.

Payment Method

Ideally, voluntary contributions are paid at the commencement of each school year. Voluntary contributions can be pre-paid at the time of ordering Student Personal Items (booklists), through EFTPOS in the front office or by direct deposit:

Account Name: Leinster Community School

Branch Number : 066 040

Account Number : 1990 1770

Use last name as reference and VC

 1 Gledden Drive
Leinster WA 6437

 (08) 9055 9600

 Leinster.cs@education.wa.edu.au

 www.leinstercs.wa.edu.au

2. Student Personal Items (Booklist)

The *Student Personal Item* list has been sent home with students for the following year at the beginning of term 4. The Student Personal Item list covers consumable items for use in lessons such as stationery items, workbooks and calculators. You are welcome to purchase these items at any retail outlet of your choice however we do offer the convenience of pre-ordering and school delivery through our chosen supplier. The table below gives the maximum costing for each year group. A student personal items list has been sent home with students for the following year during term 4.

Student Requirements			
Kindergarten	\$84.70	Year 4	\$134.90
Pre-Primary	\$122.90	Year 5	\$190.80
Year 1	\$155.60	Year 6	\$190.80
Year 2	\$137.80	High School (Year 7-10)	\$186.70
Year 3	\$137.30	High School (Year 11-12)	\$186.70

3. Charges

The charges estimated in this schedule include costs associated with specific learning activities available to all students within the year group; participation is conditional on payment being made.

Description	K	PP	Yr. 1	Yr. 2	Yr. 3	Yr. 4	Yr. 5	Yr. 6	Yr. 7-10	Yr. 11-12
Incursions/ Excursions (Inc. bus)	\$150	\$150	\$150	\$150	\$150	\$150	\$150	\$150	\$150	\$150
Interschool Sports			\$20	\$20	\$20	\$20	\$20	\$20	\$20	\$20
Graduation Shirt								\$40		\$40 (Year 12 only)
Graduation Dinner							\$40	\$40	\$40	\$40
Camp							\$500	\$500	\$800	\$800
Student Photos (costs vary depending on package)	\$85	\$85	\$85	\$85	\$85	\$85	\$85	\$85	\$85	\$85

Additional cost items such as camps, incursions, excursions etc. are estimated maximum costs.

Payment will be requested during the school year when costs and participation is confirmed.

4. Other Voluntary Funds

Other voluntary costs at Leinster Community School include a 2021 P&C Association Levy of \$20 per student. This voluntary support fund is paid to the P&C Association and is used by the P&C to provide additional resources to the school to support programs and agreed projects. This amount is to be paid directly to the P&C Association and is separate from the School's Voluntary Contribution.

Account Name: Leinster Community School P&C

Branch Number : 066 514

Account Number : 1014 7442

Use last name as reference

If you are experiencing difficulties paying any of these costs; please contact the Manager of Corporate Services to arrange a payment schedule.

Yours sincerely,
Leanne Kelleher
Principal

This document is subject to change annually.

**Leinster Community School
P&C Association Inc.**

1 Gledden Drive | Leinster WA 6437
08 9055 9600
leinsterpc@gmail.com
ABN 497 137 079 95



Contact Details

Name:

Phone:

Please make payment via direct deposit:

Name: Leinster Primary School Parents & Citizens Association Inc

BSB: 066-514

A/C number: 10147442

Please use reference "*Last Name – Uniforms*"

Description	Sizes available	Size	Qty	Price	Total
Bucket Hat, reversible, black/blue	54cm 58cm 61cm			\$15.00	
Bucket Hat, reversible, black/red	54cm 58cm 61cm			\$15.00	
Dress	4, 6, 8, 10, 12, 14, 16			\$47.00	
Jacket	4, 6, 8, 10, 12,14, 16, S, M, L, XL			\$45.00	
Shirt, School Polo – black/purple	4, 6, 8, 10, 12,14, 16, S, M, L, XL			\$30.00	
Shirt, Sports – Percys, blue	4, 6, 8, 10, 12,14, 16, S, M, L, XL			\$22.00	
Shirt, Sports – Waroonga, red	4, 6, 8, 10, 12,14, 16, S, M, L, XL			\$22.00	
Short, black	4, 6, 8, 10, 12,14, 16, S, M, L, XL			\$22.00	
Skorts, black	4, 6, 8, 10, 12,14, 16			\$22.00	
TOTAL COST OF ORDER				\$	

Leinster Community School

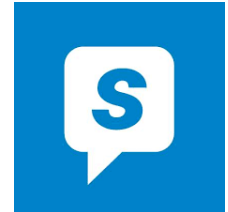
Parent Communication App



LEINSTER
COMMUNITY SCHOOL

All Leinster Community School newsletters, excursion notes and announcements will go out through the School Stream app. Along with this, you can also submit absentee notices for your child. Please sign up if you have not already done so in order to keep up to date with what's happening at the school.

- Step one:** Download the School Stream app on your mobile device.
- Step two:** Open the app and type Leinster Community School's name into the search bar to load the school's profile.
- Step three:** Make sure you agree to Push Notifications when prompted.



schoolstream

Leinster Community School

Lunch Order App



LEINSTER
COMMUNITY SCHOOL

Leinster Community School is pleased to advise that school lunch orders can now be placed through the MyPreOrder app on your smart phone device. The lunch order service is provided externally by the Tavern on a Monday, Wednesday and Friday and we're appreciative of being able to offer all families with a contactless way to order student lunches moving forward.

This app is free to download, there is no minimum spend amount and there are no credit card surcharge fees applied to your order when utilising this service.

- Step one:** Download the MyPreOrder app on your mobile device.
- Step two:** Search for Leinster Community School to commence the lunch order process through the app and follow the steps.
- Step three:** Finalise your order no later than 9.30am for same day orders, or place your order in advance.



By becoming a member of MyPreOrder at checkout this will enable one-way communication between the Tavern and the User, and also provides you with the option to save your credit card details for next time.

MyPreOrder uses a PCI compliant payment gateway to securely store and process credit/debit cards. These options are not available to you if you register as a guest.



mypreorder