

**\*Please sign and return these forms by Wednesday, 22<sup>nd</sup> February**

**ACCEPTABLE USE OF INFORMATION COMMUNICATIONS TECHNOLOGY (ICT) POLICY  
STUDENT DECLARATION 2017+**

I have read the Acceptable Use of Information Communications Technology (ICT) Policy carefully and understand the significance of the conditions and agree to abide by these conditions during 2017 and for all future years whilst attending the school. I understand that any breach of these conditions will result in internet and mobile technology access privileges being suspended or revoked.

*For further support with online issues students can call Kids Helpline on 1800 55 1800. Parents/carers call Parentline 132289 or visit <http://www.cybersmart.gov.au/report.aspx>*

Name of Student(s):

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

I acknowledge that the school may wish to publish my child(ren)'s school work and/or digital image of activities and achievements as part of a group or an individual for promotional purposes on the school web site, School TV or in Local Newspapers or as part of public displays at school, local shopping centres or online.

I allow the school to review my child(ren)'s accounts, files and online storage in order to determine the appropriateness of specific usage or saved articles in accordance with these guidelines and policies.

I also recognise that although the school has monitoring and filtering procedures in place to restrict access to controversial materials this is not always possible when using the Internet. I understand that my child(ren) is/are asked to use his/her discretion and use the Internet, school resources and equipment with due care and for school purposes only.



Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I give permission for my child(ren) to – [Please tick ✓ the appropriate response]



Yes  No **Publish written &/or artwork on the internet, local newspapers and displays using first name and class only.**



Yes  No **Appear unnamed in photographs and/or video on the school web site, School TV, local newspapers or displays in print and/or digital media portfolios.**



Yes  No **Be included named and un-named in the class digital portfolio.**

*If you answered no to any of the above, please state any special considerations, such as withholding the name if published, or any reasons of which we should be aware, regarding not publishing your child(ren)'s work, names or photographs on the school's web site, the Internet or in displays.*



Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**STUDENT CODE OF CONDUCT 2017+**

I/We have discussed the School Rules and Consequences with my/our child/children, including the procedures for 'Restorative Chat Time', 'Detention' and 'Suspensions'.

Name of Student(s): \_\_\_\_\_ Class: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Class: \_\_\_\_\_  
\_\_\_\_\_ Class: \_\_\_\_\_  
\_\_\_\_\_ Class: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**HEADLICE INSPECTIONS CONSENT FORM 2017+**

I hereby give my consent for my named child(ren) to participate in the school's Headlice Inspection Program at Patterson Lakes Primary School during 2017 and for all future years whilst attending the school.

Name of Student(s): \_\_\_\_\_ Class: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Class: \_\_\_\_\_  
\_\_\_\_\_ Class: \_\_\_\_\_  
\_\_\_\_\_ Class: \_\_\_\_\_

Parent's / Guardian's Name: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_