Parents

To assist our school staff in meeting the needs of your child and to comply with Departmental regulations, we require the following permissions to be completed and this form returned to school.

- Scripture Groups
- Supervision of Students
- Walking Excursion permission
- Child Protection Lessons

PLEASE NOTE: The information provided by YOU on this form, will be applicable for the DURATION OF YOUR CHILD’S ENROLMENT at Kapooka School (unless we are notified otherwise, in writing).

A separate form needs to be completed for EACH CHILD at Kapooka Public School.

PUPIL’S NAME: ……………………………………………………………………..

CLASS: ………………………

– SCRIPTURE GROUPS

Scripture at Kapooka is non denominational. Scripture lessons are 30 minutes once a week and are taken by ARTC Padres when available.

NOTE: Students are expected to attend Scripture lessons unless written notification is received from parents/caregivers/guardians stating otherwise.

– SUPERVISION OF STUDENTS

Supervision of students commences at 8.45 am - there is NO supervision provided before that time. From 8.45 am a teacher is on playground duty. Students are supervised during recess and lunch. Students should leave the grounds promptly after school is dismissed at 3.00 pm. Children waiting for buses, should remain in the appropriate area where there is a teacher on duty.

I understand the supervision times for students at the school and I am aware there is no supervision available outside of those hours. I will make every attempt to ensure that my child is in attendance only during those times.

Signature: …………………………………………………………………….. Date: ………………………
(Parent/Caregiver)

– WALKING EXCURSION PERMISSION NOTE

I give permission for my child ……………………………………………………………. in class ………………………. to go on walking excursions in the vicinity of Kapooka Public School and village when accompanied by a teacher.

Signature: …………………………………………………………………….. Date: ………………………

– CHILD PROTECTION LESSONS - PERMISSION NOTE

I give permission for my child ……………………………………………………………. in class ………………………. to participate in Child Protection Lessons, which are conducted at Kapooka Public School each year.

Signature: …………………………………………………………………….. Date: ………………………
(Parent/Caregiver)