Respect, Integrity & Commitment



Dear Parent / Carer

A warm welcome to Narangba Valley State High School. I know the move to secondary school or a move to a new school can be daunting for all family members and I thank you for showing trust in our school. We are a school with established traditions and a reputation for excellence. The staff of Narangba Valley State High School are committed, passionate professionals.

Narangba Valley SHS is an outstanding school with a proven track record of high academic & sporting achievement. We are a provider of amazing specialisations through academies and excellence programs. We are very proud of the achievements of all students, whether they are aiming for university, vocational training, or employment. Our school has a regular attainment of 100% QCE, so we know we are preparing all our students for a bright future.

Our mission in this school is to develop Inspired, Innovative and Resilient learners who are prepared to 'challenge the future' in a changing, dynamic world.

We also work hard at developing responsible citizens through our core values of Respect, Integrity and Commitment. We have high expectations of our students, knowing that this will bring out their best.

Research says students benefit from a strong partnership between the school and the family. Our caring, supportive, and very dedicated staff work professionally to ensure that the programs at the school provide education of a high standard. Staff continue to add to and extend the innovative programs at the school to ensure the inclusion of latest technologies and curriculum developments.

We encourage families to contact staff members if there are ever any concerns or questions. Our staff are always willing to answer your questions, and of course, we will be having our various information evenings for parents and carers.

Welcome to Narangba Valley State High School.

Kyrra Mickelborough

K. W (ickelb arough)

Principal



2023 Year 7 Enrolment

STUDENT NAME				
OFFICE USE				
Date Received		Received By		
House	Language	SRS	Media	Program
Before returnin	g please check have yo	ou completed the fo	ollowing:	
Copy of birth certificate				
Enrolment Management –	FORM 1 (2 forms proof of res	idency)		
Application for enrolment completed and signed				
SRS Participation Form				
Language Preference form 4 completed				
The Arts Preference form	17 completed			
Enrolment Agreement completed and signed				
Student Agreement completed and signed				
Responsible Use Agreement completed and signed				
USI Form				
Media Consent Form 11				

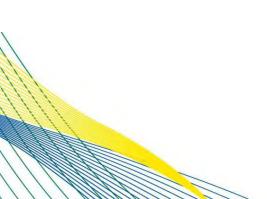


Contents of enrolment book. Please note Forms 1 –8 & 17

Form 1 *	Enrolment Management Check Sheet
Form 2 *	9 Pages Application for student enrolment
Form 3*	Student Resource Scheme
Form 4*	Subject Selection
Form 5 *	Enrolment Agreement
Form 6 *	Student Agreement – Network & Internet usage policy
Form 7 *	Responsible use agreement
Form 8 *	USI Form
Form 11*	Media Consent
Form 17 *	The Arts preference

The following forms only need to be completed if required.

The following is	offile offily field to be completed if required.
Form 12 A	Administration of Medication
Form 12 B	Consent to Administer Medication
Form 14	ILC Referral Form
Form 15	ESL Support – English Second Language
Form 18	Science Mathematics Academy Information page – application is an online process
Form 19	AFL Development Academy Application
Form 20	Netball Development Academy Application
Form 21	Music Academy Application
Form 22	Instrumental Music Application



Student Name	
School most recently attended	
Name of parents	
Residential address	
	Postcode:
Please complete all of the sections below that Admissions Criteria – Tick the relevant criteria and	•
Resides within the Local Catchment Area (Please localcatchment area by referring to http://www.qg.27.413487,153.01737&z=14↦=roadmap&layers-1	so.gld.gov.au/maps/edmap/?ll=-
Please attach documentary evidence as required	_
One from primary source and one from secondary	source
Primary Source	
♦ Current lease agreement, or rates notice. C	Or unconditional sales agreement
Secondary Source	
 Copy of utility bill Copy of other formal document showing this guardian' Subject to Principal approval 	same address and parent's or legal
♦ Sibling of student as described in	
Admissions Policy	
Please provide siblings details below:	
Current NVSHS Student Name:	Year level in 2021
Are you making application an Excellence Acade	my Program: MUSIC SMA ACADEMY Complete Form 21 Complete SMA application on line
Are you making application a Developmental Ac	ademy: AFL NETBALL Complete Form 19 Complete Form 20
Parent / Guardian signature	Date

FORM 2 (9 Pages)



Application for student enrolment form

INSTRUCTIONS

Please refer to the Application to enrol in a Queensland state school information sheet at the end of this form when completing this application. Completion and submission of this application form to the school does not confirm enrolment. The school will notify you of the outcome of your application as soon as practicable.

Failure or refusal to complete those sections of the form marked with an (*) or to provide required documentation may result in a refusal to process your application. These questions and your consent are considered necessary to ensure the school can undertake its administrative and care responsibilities.

Sections of the form not marked (*) are optional. However, failure to complete these sections may result in the school not being eligible for important Federal and State Government funding reliant on such information. Parents of all students in Australia have been asked to provide information on their family background as part of a national initiative towards providing an education system that is fair to all students, regardless of their background. The required information includes the Indigenous status and language background of the student, and the education, occupation and language background of the parents.

If you have any questions about the enrolment form or process, or require assistance completing this form, including translation services, please contact the school in the first instance.

PRIVACY STATEMENT

The Department of Education (DoE) is collecting the information on this form for the purposes outlined in the *Education (General Provisions) Act 2006* (Qld) (EGPA 2006), and in particular for:

- i. assessing whether your application for enrolment should be approved
- ii. meeting reporting obligations required by law or under Federal State Government funding arrangements
- iii. administering and planning for providing appropriate education, training and support services to students
- iv. assisting departmental staff to maintain the good order and management of schools, and to fulfil their duty of care to all students and staff
- v. communicating with students and parents.

This collection is authorised by ss. 155 and 428 of the EGPA 2006. DoE will disclose personal information from this form to the Queensland Curriculum and Assessment Authority when opening student accounts, in compliance with Part 3 of the Education (Queensland Curriculum and Assessment Authority) Act 2014 (Qld).

Personal Information from this form will also be supplied to Centrelink in compliance with ss.194 and 195 of the Social Security (Administration) Act 1999 (Cth). De-identified information concerning parents' school and non-school education, occupation group and main language other than English and students' country of birth, main language other than English, gender and Indigenous status, is supplied to the Australian Government Department of Education in compliance with Federal – State Government funding agreements.

Personal information collected on this form may also be disclosed to third parties where authorised or required by law. Yourinformation will be stored securely. If you wish to access or correct any of the personal information on this form or discuss how it has been dealt with, please contact the school in the first instance. If you have a concern or complaint about the way your personal information has been collected, used, stored or disclosed, please also contact the school in the first instance.

DPOSDECTIVE STU	DENT DEMOGRAPHIC D	ETAII S	
TROST ECTIVE STOR	SENT BEMOSKATTIE B	LIAILO	
Legal family name* (as per birth certificate)			
Legal given names* (as per birth certificate)			
Preferred family name		Preferred given names	
Gender*	Male Female	Date of birth*	
Copy of birth certificate available to show school staff*	Yes No	An alternative to birth certificate w prospective student born in countr suffice). This does not include failt The requirement to sight the birth previously enrolled in a state scho	ithout enrolling staff sighting the prospective student's birth certificate. ill be considered where it is not possible to obtain a birth certificate (e.g. y without birth registration system. Passport or visa documents will ure to register a birth or reluctance to order a birth certificate. certificate does not apply where the prospective student has been ol and a birth certificate has been sighted. d for enrolment by EQI, a passport or visa will be acceptable.
For prospective mature age students, proof of identity supplied and copied*	Yes No	Prospective mature age students current driver's licence; or adult proof of age card; or current passport.	must provide photographic identification which proves their identity:

APPLICATION DETA	ILS				
Has the prospective student ever attended a Queensland state school?	Yes No	If yes, provide na	ame of school	l and approximate date of enrolment.	
What year level is the prospective student seeking to enrol in?		Please provide t	he appropriate	e year level.	
Proposed start date		Please provide t	he proposed s	starting date for the prospective student at this school.	
			Name:		
Does the prospective		If yes, provide	Year Level		
student have a sibling attending this school or any other Queensland state school?	Yes No	name of sibling, year level, date of birth, and	Date of birth		
		school	SCHOOL		
INDIGENOUS STATU	JS				
Is the prospective student of Aboriginal or Torres Strait Islander origin?	No Aboriginal	Torres Strait	Islander	Both Aboriginal and Torres Strait Islander	
FAMILY DETAILS					
Parents/carers	Parer	nt/carer 1		Parent/carer 2	
Family name*					
Given names*					
Title	Mr Mrs	Ms Miss	5 Dr	Mr Mrs Ms Miss Dr	
Gender	Male Female			Male Female	
Relationship to prospective student*					
Is the parent/carer an emergency contact?*	Yes No	Yes No		Yes No	
1 st Phone contact number*	Work/home/mobile			Work/home/mobile	
2 nd Phone contact number*	Work/home/mobile			Work/home/mobile	
3 rd Phone contact number*	Work/home/mobile			Work/home/mobile	
Email					
Occupation					
What is the occupation group of the parent/carer?	(Please select the parental provided at the end of this currently in paid work but or has retired in the last 12 occupation. If parent/care last 12 months, enter '8')	form. If parent/carer has had a job in the la 2 months, please use	1 is not last 12 months the last	(Please select the parental occupation group from the list provided at the end of this form. If parent/carer 2 is not currently in paid work but has had a job in the last 12 months or has retired in the last 12 months, please use the last occupation. If parent/carer 2 has not been in paid work in the last 12 months, enter '8')	
Employer name	,				
Country of birth					
Does parent/carer 1 or parent/carer 2 speak a language other than English at home? (If more than one language, indicate the one that is	No, English only Yes, other – please spe	ecify		No, English only Yes, other – please specify	
spoken most often)	Needs interpreter?	Yes No		Needs interpreter? Yes No	
Is the parent/carer an Australian citizen?	Yes No			Yes No	
Is the parent/carer a permanent resident of Australia?	Yes No			Yes No	

FAMILY DETAILS (co	ontinued)			
Parents/carers	Parent/carer 1	Parent/carer 2		
Address line 1				
Address line 2				
Suburb/town				
State	Postcode	Postcode		
Mailing address (if it is the sa	ame as principal place of residence, write 'AS ABOVE')			
Address line 1				
Address line 2				
Suburb/town				
State	Postcode	Postcode		
Parent/carer school education	What is the <i>highest</i> year of schooling parent/carer 1 has completed? (For people who have never attended school, mark 'Year 9 or equivalent or below')	What is the highest year of schooling parent/carer 2 has completed? (For people who have never attended school, mark 'Year 9 or equivalent or below')		
Year 9 or equivalent or below				
Year 10 or equivalent				
Year 11 or equivalent				
Year 12 or equivalent				
Parent/carer non-school education	What is the level of the <i>highest</i> qualification parent/carer 1 has completed?	What is the level of the <i>highest</i> qualification parent/carer 2 has completed?		
Certificate I to IV (including trade certificate)				
Advanced Diploma/Diploma				
Bachelor degree or above				
No non-school qualification				
COUNTRY OF BIRTH	· *			
In which country was the prospective student born?	Australia Other (please specify country) Date of arrival in Australia			
Is the prospective student an Australian citizen?	Yes No (if no, evidence of the prospective studen	nt's immigration status to be completed)		
PROSPECTIVE STU	DENT LANGUAGE DETAILS			
Does the prospective	No, English only			
student speak a language other than English at	Yes, other – please specify			
home?				
EVIDENCE OF PROS Australian citizen)*	SPECTIVE STUDENT'S IMMIGRATION STAT	US (to be completed if this person is NOT an		
Permanent resident	Complete passport and visa details section below			
	Date of arrival in Australia	Date enrolment approved to:		
Student visa holder	Duce of arrival in Australia	Date enrolment approved to:		
	EQI receipt number:	rary visa holders must obtain an 'Approval to enrol in a state		
Temporary visa holder	complete passport and visa details section below. Tempor school' from EQI	ary visa notatio mast obtain an Approval to emoi in a State		
Other, please specify				

Uncontrolled copy. Refer to the Department of Education Policy and Procedure Register at https://ppr.qed.qld.gov.au/pp/enrolment-in-state-primary-secondary-and-special-schools-procedure to ensure you have the most current version of this document

EVIDENCE OF PROS	SPECTIVE STUDENT'S IMMIGRA	ATION STAT	US * (continued)		
•	be completed for a prospective student who		•		
For prospective students arri	will have a visa grant notification with an ind ving in Australia as refugee or humanitarian '' recorded must be sighted by the school.			led card or 'Document	to travel to
Passport number		Passport exp	iry date		
Visa number		Visa expiry d	ate (if applicable)		
Visa sub class					
PROSPECTIVE STUD	DENT'S PREVIOUS EDUCATION	I / ACTIVITY			
Where does the prospective student come from?		erseas			
Previous education/activity	Kindergarten School VET Part-time employment Other	Home educ	cation Full-time en	nployment	
Please provide name and address of education provider/activity provider/employer					
RELIGIOUS INSTRU	CTION*				
From Year 1, the prospective instruction if it is available.	student may participate in religious	Do you want th instruction?	e prospective student to	o participate in religiou	s
school's religious instruction receive other instruction in a	nated religion is not represented within the program, the prospective student will separate location during the period	Yes No			
arranged for religious instruc Parents/carers may change the notifying the principal in writi	nese arrangements at any time by	If 'Yes', please nominate the religion:			
PROSPECTIVE STUD	DENT ADDRESS DETAILS*				
Principal place of residence a					
Address line 1					
Address line 2					
Suburb/town		State		Postcode	
Mailing address (if it is the sa	me as principal place of residence, write 'AS	ABOVE')			
Address line 1					
Address line 2					
Suburb/town		State		Postcode	
Email					
	ACT DETAILS (Other emergency cannot be contacted. At least one eme				ot
	Emergency contact			jency contact	
Name					
Relationship (e.g. aunt)					
1 st phone contact number*	Work/home/mobile		Work/home/mobile		
2 nd phone contact number*	Work/home/mobile		Work/home/mobile		
3 rd phone contact number*	Work/home/mobile		Work/home/mobile		

PROSPECTIVE STUDENT MEDICAL INFORMATION (including allergies)*

Privacy Statement

The Department of Education (DoE) is collecting this medical information in order to address the medical needs of students during school hours as well as during school excursions, school camps, sports and other school activities. DoE will not use this information to make a decision about a prospective student's eligibility for enrolment. The information will only be used by authorised employees of the department and DoE will only record, use and disclose the medical information in accordance with the confidentiality provisions at Section 426 of the Education (General Provisions) Act 2006.

It is essential that the school is advised before the prospective student's first day of attendance if the prospective student has any medical conditions. The school administration staff must also be informed of any new medical conditions or a change to medical conditions as soon as they are known.

Should the prospective student need to take routine medication during school hours, the *Parent consent to administer medication at school* form must be completed before school staff can administer medication. All medication must be provided in the original container with a pharmacy label providing clear instructions for administration. For emergency medication the school will also require a doctor's letter containing detailed instructions and or a signed Action Plan / Emergency Health Plan. Parent consent and health plans must be reviewed annually. All original documentation will be retained at the office and copies of Action or Emergency Health Plans kept with the student.

	ncy Health Plans kept with the student.	inidany. An original accumo	
No known medical conditions			
Medical condition (including allergies/sensitivities), symptoms and management (please refer to the list of medical condition categories provided)			
Medical condition (including allergies/sensitivities), symptoms and management (please refer to the list of medical condition categories provided)			
Medical condition (including allergies/sensitivities), symptoms and management (please refer to the list of medical condition categories provided)			
Does the prospective student require any medical aids or devices (such as glasses, contact lenses, prosthetics or orthotics)? This is for the purpose of informing planning for school activities such as sport and school excursions.	No Yes, please specify		
Name of prospective student's medical practitioner (optional)		Contact number of medical practitioner	
Medicare card number (optional)		Position Number	
Cardholder name (if not in name of prospective student)			
Private health insurance company name (if covered) (optional)		Private health insurance membership number (leave blank if company name is not provided)	
cases where an immediate but n	ct the prospective student's medical practitioner for the purion-life threatening response is required (for instance, whe ting event), and to provide Medicare card details if require ails have been provided above)	n the prospective student	Yes No
COURT ORDERS*			
Out-of-Home Care Arra	angements*		

COURT ORDERS* Out-of-Home Care Arrangements* Under the Child Protection Act 1999, when a Child Protection Order is approved by the Children's Court, the child is placed in out-of-home care (OOHC). Out-of-home care includes short or long term placement with an approved kinship or foster carer; in a supported independent living arrangement; in a safe house; and in residential care. Is the prospective student identified as residing in out-of-home care? If yes, what are the dates of the court order? Please provide a copy of the court order and/or the Authority to Care. Commencement date End date Contact details of the Child Safety Officer (if known) Name Phone number

COURT ORD	ERS* (continued)					
Family Court	Orders*					
Are there any current orders made pursuant to the Family Law Act 1975 concerthe welfare, safety or parenting arrangements of the prospective student?			erning	Yes	No	
If yes, what are the	dates of the court orde	er? Please provide a copy of the co	ourt order.	Commencement d	late	
				End date		
Other Court (Orders*					
		such as a domestic violence order arrangements of the prospective s		Yes	No	
If yes, what are the	dates of the court orde	er? Please provide a copy of the co	ourt order.	Commencement d	late	
				End date		
APPLICATIO	N TO ENROL*					
	rol my child or myself at					
	· · · -	information on this form may lead to	the reversal	of a decision to appre	ovo enrolment	L boliove that the information L
		in every particular, to the best of my			ove emolinent.	believe that the information i
		Parent/carer 1		Parent/carer 2	Pr	ospective student (if student is mature age or independent)
Signature						
Date						
Office use o	nlv					
Enrolment decision		Has the prospective student be	en accepted	d for enrolment?	Yes No (a	applicant advised in writing)
		If no, indicate reason:				
		☐ Does not meet School EMP of				h I
		 □ Prospective student is mature □ Does not meet Prep age eligi 	_		re age state sc	hool
		☐ Prospective student is subje			chool at the tin	ne of enrolment application
		☐ Does not meet requirements		-		
		☐ Does not have an approved t☐ School does not offer year le		_		lled in
		☐ Prospective student has no			_	
Date enrolment processed		Year level	Roll Class	EQ ID		
Independent student	Yes No			rtificate/passport sig and DOB confirme		Yes No Number:
Is the prospective	student over 18 vears of	f age at the time of enrolment?	□ □ _{Yes}			
If yes, is the prosp	_	rom the mature age student	Yes	_		
process? If no, has the prosposition in the prosposition in the prosposition in the process of	pective mature age stud	lent consented to a criminal	Yes	No No		
School house/			EAL/D s	upport		Yes No
team	Associ	iated				To be determined
FTE	unit	iu.cod		l associated docume	ents sighted	Yes No
EQI category			TV - tem	dent visa nporary visa pendent – parent on	student visa	EX – exchange student DE – distance education

Parental occupation groups for use with parent/carer details

Group 1: Senior management in large business organisation, government administration and defence, and qualified professionals

Senior executive/manager/department head in industry, commerce, media or other large organisation.

Public service manager [section head or above], regional director, health/education/police/fire services administrator

Other administrator [school principal, faculty head/dean, library/museum/gallery director, research facility director]

Defence Forces commissioned officer

Professionals generally have degrees 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

Health, education, law, social welfare, engineering, science, computing professional

Business [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]

Air/sea transport [aircraft/ship's captain/officer/pilot, flight officer, flying instructor, air traffic controller].

Group 2: Other business managers, arts/media/sportspeople and associate professionals

Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business

Specialist manager [finance/engineering/production/personnel/industrial relations/sales/marketing]

Financial services manager [bank branch manager, finance/investment/insurance broker, credit/loans officer]

Retail sales/services manager [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency]

Arts/media/sports [musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof-reader, sportsperson, coach, trainer, sports official]

Associate professionals generally have diploma/technical qualifications and support managers and professionals

Health, education, law, social welfare, engineering, science, computing technician/associate professional

Business/administration [recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager]

Defence Forces senior Non-Commissioned Officer.

Group 3: Tradespeople, clerks and skilled office, sales and service staff

Tradespeople generally have completed a four year trade certificate, usually by apprenticeship. All tradespeople are included in this group **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]

Skilled office, sales and service staff:

Office [secretary, personal assistant, desktop publishing operator, switchboard operator]

Sales [company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher]

Service [aged/disabled/refuge/childcare worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor].

Group 4: Machine operators, hospitality staff, assistants, labourers and related workers

Drivers, mobile plant, production/processing machinery and other machinery operators

Hospitality staff [hotel service supervisor, receptionist, waiter, bar attendant, kitchen hand, porter, housekeeper]

Office assistants, sales assistants and other assistants:

Office [typist, word processing/data entry/business machine operator, receptionist, office assistant]

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]

Assistant/aide [trades' assistant, school/teacher aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant]

Labourers and related workers

Defence Forces ranks below senior NCO not included above

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]

Other worker [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor].

Group 8: Have not been in paid work in the last 12 months

State schools standardised medical condition category list

Acquired brain injury
Allergies/Sensitivities
Anaphylaxis
Airway/lung/breathing - Oxygen required (continuously/periodically)
Airway/lung/breathing - Suctioning
Airway/lung/breathing - Succioning Airway/lung/breathing - Tracheostomy
Airway/lung/breathing - Tracheostorry Airway/lung/breathing - Other
Artificial feeding - Gastrostomy device (tube or button)
Artificial feeding - Gastrostorry device (tube or buttorr) Artificial feeding - Nasogastric tube
Artificial feeding - Nasogastric tube Artificial feeding - Jejunostomy tube
, ,
Artificial feeding - Other
Asthma Asthma at a straight a desirable and a straight and a stra
Asthma – student self-administers medication
Attention-deficit /Hyperactivity disorder (ADHD)
Autism Spectrum Disorder (ASD)
Bladder and bowel - Urinary wetting, incontinence
Bladder and bowel - Faecal soiling, constipation, incontinence
Bladder and bowel - Catheterisation (continuous, clean intermittent)
Bladder and bowel - Stoma site, urostomy, Mitrofanoff, MACE, Chair
Bladder and bowel - Other
Blood disorders - Haemophilia
Blood disorders - Thalassaemia
Blood disorders - Other
Cancer/oncology
Coeliac disease
Cystic Fibrosis
Diabetes - type one
Diabetes - type two
Ear/hearing disorders - Otitis Media (middle ear infection)
Ear/hearing disorders - Hearing loss
Ear/hearing disorders - Other
Epilepsy - Seizure
Eye/vision disorders
Endocrine disorder - Adrenal hypoplasia, pituitary, thyroid
Heart/cardiac conditions - Heart valve disorders
Heart/cardiac conditions - Heart genetic malformations
Heart/cardiac conditions - other
Mental Health - Depression
Mental Health - Anxiety
Mental Health - Oppositional defiant disorder
Mental Health - Other
Muscle/bone/musculoskeletal disorders - spasticity (Baclofen Pump)
Muscle/bone/musculoskeletal disorders - Other
Skin Disorders - eczema
Skin Disorders - psoriasis
Swallowing/dysphagia - requiring modified foods
Swallowing/dysphagia - requiring artificial feeding
Transfer & positioning difficulties
Travel/motion sickness
Other

Application to enrol in a Queensland state school

This sheet contains information on how to complete the Application for student enrolment form (SEF-1 Version 8).

Entitlement to enrolment

Under the *Education (General Provisions) Act* 2006 (*Qld*) a state school must enrol a prospective student if they are entitled to enrolment. While not exhaustive, the following matters may affect a prospective student's entitlement to enrol in a state school:

- if the school has a School Enrolment Management Plan or an Enrolment Eligibility Plan (enrolment is subject to eligibility under the plan)
- the applicant is a prospective mature age student (the applicant can only apply for enrolment at a mature age state school and will be subject to a satisfactory criminal history check, or as a student in a program of distance education. All prospective mature age students must have a remaining allocation of state education.)
- the prospective student is not of correct age for enrolment (relates to Preparatory Year and Years 1 to 6)
- the prospective student has been excluded, or is subject to suspension from a state school at the time of the application
- the school principal reasonably believes that the prospective student presents an unacceptable risk to the safety or wellbeing of members of the school community (application is referred to the Director-General)
- the school is a state special school and the prospective student does not meet the criteria for enrolment in a special school
- the proposed enrolment requires approval as part of a flexible arrangement under s.183 of the Education (General Provisions) Act 2006 (Qld), and the arrangement has not yet been approved
- the prospective student is not an Australian resident or citizen or the child of an Australian permanent resident or citizen (visa restrictions may apply, fees may be charged, in some cases legislation requires that the prospective student must obtain approval from the Chief Executive via Education Queensland International (EQI) to enrol)
- the school does not offer the year level that the prospective student should be enrolled in
- the prospective student has no remaining semester allocation of state education.
 Enrolment cannot proceed until additional semesters are applied for by the prospective student (or parent on their behalf) and granted.

Prospective student

A prospective student is a person who has applied to enrol at a state school but who has not yet been accepted for enrolment.

Parent's occupation and education

All parents across Australia, no matter which school their child attends, are asked to provide information about family background (answering this question is optional). The main purpose of collecting this information is to promote an education system which is fair for all Australian students regardless of their background.

Court Orders

Any court orders concerning the prospective student's welfare, safety or parenting arrangements should be provided to the school, and the school should also be provided with any new or updated orders.

Name on enrolment form

A prospective student should be enrolled under their legal name as per their birth certificate. There is provision to also record a preferred family and/or given name. The preferred name will be used on internal school documents such as class rolls. The legal name will appear on semester reports unless there is a specific request to use the preferred name only. This request can come from parents/carers or the student (if the student is independent/mature age).

Gender

Information about gender is supplied to the Federal Government to comply with State funding agreements. The gender category with which a person identifies may not match the sex they were assigned at birth. There is no requirement for a student's gender recorded on this form to align with the sex shown on their birth certificate or passport.

Religious Instruction

Religious instruction is a program approved and provided by a religious denomination or religious society. Other instruction relates to part of a subject area that has been covered within the curriculum and may include, but is not limited to, personal research and/or assignments, revision of class work, and wider reading. Information about religious instruction available at the school, and about other instruction, is provided by the school at the time of enrolment and on the school's website.

Student Resource Scheme - Participation Agreement Form

The Student Resource Scheme

The Student Resource Scheme (SRS) is a user-charging scheme operated by schools to provide parents with a mechanism to access individual student resources that are not funded by the government.

Government funding for schools does not extend to individual student resources and equipment for their personal use or consumption. Supply of these items, such as textbooks and personal laptops/iPads, is the responsibility of the parent.

The objective of the scheme is to provide parents a convenient and cost-effective alternative to individual supply of resources for their students. Participation in the SRS is optional, and no obligation is placed on a parent to participate.

Terms and conditions for participating in the scheme are provided on the reverse side of the form. Information is also provided on the Textbook and Resource Allowance (TRA) where applicable.

This Participation Agreement Form applies for the duration of a student's enrolment at the school, however parents who are participating in the scheme can choose to opt out from the SRS in future years by completing a new Participation Agreement Form. Any new Participation Agreement Form submitted annually and received by the school will supersede the previous form lodged.

Parents pay the annual participation fee in accordance with the selected payment arrangement. If a student joins the school mid-year, a pro-rata participation fee may apply.

Parents not participating in the scheme must provide their student with all items that would otherwise be provided by the scheme as detailed in the information provided by the school. Parents can choose to join the SRS in future years by completing a new Participation Agreement Form.

To assist schools in managing and administering the scheme, parents are requested to complete the Participation section of this form and return it to the school.

If parents have not completed and returned the form before the due date indicated by the school in the SRS Annual Parent Information documents, the school will take the view that the parent does not wish to participate.

Payment

Participation

On agreeing to participate in the SRS, a parent agrees to pay the participation fee as advised and invoiced by the school. For families experiencing financial hardship, please contact the school as soon as possible to discuss options available.

YES, I	wish to participate in the Student Resource Scheme. I have read and understand the Terms and Conditions of the scheme (see reverse) and agree to abide by them and to pay the annual participation fee in accordance with the selected payment arrangement. I understand that I can opt out of participation in the SRS in any year by completing a new Participation Agreement Form.
NO, I	have read the terms and conditions and I do not wish to participate in the Student Resource Scheme. understand I must provide my child with all items that would otherwise be provided by the SRS as detailed in the information provided by the school. I understand that I can choose to join the SRS in future years by completing a new Participation Agreement Form.

School Name Narangba Valley State High School	
Form Return Date	
Student Name	
Year Level	Year 7 2023
Parent Name	
Parent Signature	
Date	

Privacy Statement

The Department of Education collects the information you complete on the Participation Agreement Form in order to administer the Student Resource Scheme (SRS). The information will only be accessed by school employees administering the SRS. However, if required, some of this information may be shared with departmental employees for the purpose of debt recovery. Your information will not be given to any other person or agency unless you have given permission or the Department of Education is authorised or required by law to make the disclosure.



Terms and Conditions

Definition

 Reference to a "parent" is in accordance with the definition in the Education (General Provisions) Act 2006 and refers equally to an independent student.

Purpose of the SRS

- In accordance with the Act, the cost of providing instruction, administration and facilities for the education of students enrolled at state schools who are Australian citizens or permanent residents, or children of Australian citizens or permanent residents, is met by the State.
- Parents are directly responsible for providing textbooks and other personal resources for their children while attending school.
- The SRS enables a parent to enter into an agreement with the school to provide the resources as advised by the school for a specified annual participation fee.

Participation in the SRS

- Participation in the SRS is optional and parents are under no obligation to participate.
- The school will provide parents with a list of resources supplied by the SRS to enable parents to assess the cost effectiveness of participation.
- Parents indicate whether or not they wish to participate in the SRS by completing this Participation Agreement Form.
- Parents must complete and sign the Participation Agreement Form and return it to the school by the advertised date.
- This agreement is for the duration of the student's enrolment at the school, unless a new Participation Agreement Form is completed.
- 10. Parents are given the option annually to choose whether to participate in the SRS or not by completing this form.
- 11. Where a parent signs up to participate in the SRS they are agreeing to pay the annual participation fee for the items provided by the SRS.
- Payment of the participation fee implies acceptance of the SRS including the Terms and Conditions irrespective of whether or not the signed form has been returned.
- 13. Where a student starts at the school during the school year, the parent may be entitled to pay a pro-rata participation fee to participate based on a 40-week school year.
- 14. Where a participation fee has been paid and a student leaves the school during the year, the school must determine if the parent is eligible for a pro-rata refund. This will also take into account any prorata of the Textbook and Resource Allowance (TRA) (see Additional Information regarding TRA eligibility) and any outstanding SRS debts (including any debts from damaged or non-returned items). Where the cost of outstanding debts is higher than the calculated refund, the parent is liable to pay this balance of funds.

Non-Participation in the SRS

- 15. Parents who choose not to participate in the SRS are responsible for providing their student with all items that would otherwise be provided by the SRS to enable their student to engage with the curriculum.
- The school will provide non-participating parents with a list of resources the parents are required to supply for their child.
- All items included in the SRS must be able to be independently sourced, purchased and supplied by parents who choose not to participate in the SRS.
- 18. As the SRS operates for the benefit of participating parents and is funded from participation fees, SRS resources will not be issued to students whose parents choose not to participate in the SRS.

The Resources

- 19. SRS funds received by the school will only be expended on student resources outlined in the school's SRS and will not be expended on other items or used to raise funds for other purposes.
- 20. In return for payment of the participation fee, the SRS will provide the participating student with the entire package of resources for the specified participation fee. It is not available in parts unless specifically provided for by the school in the fee structure.
- 21. The resources, as determined and advised by the school maybe:
 - retained by the student and used at their discretion; or
 - used/consumed by the student in the classroom; or

- hired to the student for their personal use for a specified period
 of time
- 22. All SRS resources hired to a student for their temporary use remain the property of the school. The resources must be returned by the agreed date or if the student leaves the school.
- Parents are responsible for ensuring that any hired SRS resources provided for their child's temporary use are kept in goodcondition.
- 24. The school administration office must be notified immediately of the loss or damage to any hired item.
- Where a hired item is lost, not returned, or damaged, parents will be responsible for payment to the school of the value of the item or its repair.
- 26. The replacement cost of any resource may be up to the maximum value (subject to depreciation where appropriate) of the acquisition cost to the school.
- 27. Parents may be responsible for supplying their child with other resources not specified in the SRS as advised by the school.

Payment Arrangements

- Payment of the participation fee may be made in whole, as per a nominated payment plan, or for another amount as approved by a Principal.
- 29. Payment of the participation fee must be made as per the payment methods nominated by the school.
- 30. Any concessions relating to the participation fee will be at the discretion of the Principal.

Debt Management

- 31. Payment of the participation fee is a requirement for continued participation in the SRS.
- Non-payment of the participation fee by designated payment date(s) may result in debt recovery action in accordance with the Department's Debt Management
 Procedure http://ppr.qed.qld.gov.au/corp/finance/accounts/Pages/Debt-Management.aspx.

Parents' Experiencing Financial Hardship

- Parents experiencing financial hardship who are currently participating in or wish to participate in the SRS should contact the school to discuss options.
- 34. Principals may vary payment options, negotiate alternative arrangements and/or waive all or part of the participation fee for parents experiencing financial hardship.
- 35. The onus of proof of financial hardship is on the parent.
- $36. \ \ The school \ may \ require \ annual \ proof \ of \ continuing \ financial \ hardship.$
- 37. All discussions will be held in the strictest confidence.

Additional Information

Textbook and Resource Allowance (TRA)

- The Queensland Government provides financial assistance to parents of students in Years 7 to 12, to offset the costs of textbooks and other resources. Assistance is provided in the form of a TRA which is paid through the school. Refer to the department's website for current TRA rates https://education.qld.gov.au/about-us/budgets-funding-grants/grants/parents-and-students/textbook-resource-allowance.
- The TRA is used to offset the fees associated with participation in the SRS.
- Parents not participating in the SRS will receive the TRA directly from the school.
- Parents not participating in the SRS should contact the school directly if they do not automatically receive the payment.





YEAR 7 2023 - LANGUAGE PREFERENCE

Student Nam	ne:				
Primary Scho	ool:				_
	study either Japai erence 1 being wh			year. Please numbe	r the languages 1 - 3 in the
French			Japanese		Spanish 🔲
	eracy, the school m				nimum standards in Literacy for Literacy and Numeracy in
Do you conse	ent with the schoo	l placing your c	hild in the Cultura	al Program?	
	that Languages ot is only possible if				d 8 and removal from
Doront signat	ture:			Yes□	No \square
raient signa	.ure			1es _	NO L
Student signa	ature:				
Parent signat	ture:				

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FORM 17

ARTS SUBJECT PREFERENCE FORM – YEAR 7 in 2023

Student Name	
Parent Signature	

For 2023, Year 7 students will have the opportunity to preference their choice of Arts subjects.

All enrolments are kept in the order of receipt and preferences will be entered in this order. Please note that availability in subjects and time table structure may mean that your first preference is not available.

Narangba Valley SHS offers many pathways in The Arts, including Excellence programs in Dance and Drama which begin in Year 8. Auditions to these programs begin in term three, 2023.

For further information, please contact the Arts HOD, on 3385 4555 or email on hodthearts@narangbavalleyshs.eq.edu.au

Note – If you are applying for Music Academy this is on a separate form, but you must still complete this form as well for your semester 2 rotation.

Please list preferences from 1 to 5 in order of what you would most like to study.

Dance	Drama	Media	Music	Visual Art

Office Use:	
Return number	



Narangba Valley State High School

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Enrolment Agreement

This enrolment agreement sets out the responsibilities of the student, parents or carers and the school staff about the education of students enrolled at Narangba Valley State High School.

Responsibility of student to

- attend school regularly, on time, ready to learn and take part in school activities.
- act at all times with respect and show tolerance towards other students and staff.
- work hard and comply with requests or directions from the teacher and school staff.
- abide by school rules, meet homework requirements and wear school's uniform.
- respect the school environment.

Responsibility of parents to

- attend open evenings for parents.
- let the school know if there are any problems that may affect your child's ability to learn.
- inform school of reason for any absences.
- treat school staff with respect and tolerance.
- support the authority and discipline of the school enabling your child to achieve maturity, self discipline and self-control.
- abide by school's policy regarding access to school grounds before, during and after schoolhours.
- advise Principal if your child is in the care of the state or your are in the carer of a child in the care of the state.
- inform school if your child's living arrangements change and provide written details of new home address and phone number.

Responsibility of school to

- develop each individual student's talent as fully possible.
- inform parents and carers regularly about how their children are progressing.
- inform students, parents and carers about what the teachers aim to teach the students eachterm.
- teach effectively and to set the highest standards in work and behaviour.
- take reasonable steps to ensure the safety, happiness and self confidence of all students.
- be open and welcoming at all reasonable times and offer opportunities for parents and carers to become involved in the school community.
- clearly articulate the school's expectations regarding the responsible behaviour plan for students and the schools dress code policy.
- ensure that parents and carers are aware of the school's insurance arrangements and accident cover for students.
- advise parents and carers of extra-curricular activities operating at the school in which their child may become involved.
- ensure that the parent / carer is aware of the school's record -keeping policy including the creation of a transfer note should the student enrol at another school.
- set, mark and monitor homework regularly in keeping with the school's homework policy.
- contact parents and carers as soon as is possible if the school is concerned about the child's school work, behaviour, attendance or punctuality.
- deal with complaints in an open, fair and transparent manner.
- consult parents on any major issues affecting students.
- treat students and parents with respect and tolerance.

I accept the rules and regulations of Narangba Valley State High School as stated in the school policies that are available to me as follows:

- Responsible Behaviour Plan for Students
- Student Dress Code
- Homework Policy
- School Charges and voluntary contributions.
- Student usage of internet, intranet and extranet.
- Absences
- School Excursions.
- Complaints management,
- Consent to use Copyright Material, Image, Recording or Name.
- Appropriate Use of Mobile Telephones and other Electronic Equipment by Students.

I acknowledge that information about the school's current programs and services has been explained to me.

SCHOOL POLICY AND PROCEDURES AGREEMENT

I	(student name) hereby res of Narangba Valley State High School. This
Signed	(student)
I	(parent/ guardian) support ies and procedures and will ensure my child meets
Signed	(narent / quardian)

FORM 6 (2 Pages)

Network and Internet Usage Policy

STUDENT AGREEMENT

Narangba Valley State High School encourages students to become familiar with the use of Information and Communication Technology. This agreement must be signed by students and parents / guardians and returned in order for the student to have access to the school's network and Internet services.

I understand that the school's computer network can connect me to useful information. I have read the Network and Internet Usage Policy Agreement below. I hereby agree that while having access to the schools computer network and that while using the Internet and other information technology services.

I WILL

- Use my Network and Internet access solely for educational purposes.
- Observe all copyright laws, including those relating to computer software.
- Respect the rights and privacy of other users.
- Report any obscene or offensive material I encounter.
- If accidentally come across something that is illegal, dangerous or offensive, I will:
- · Clear my screen immediately.
- · Immediately and quietly inform my teacher.
- Remove work that is no longer required, at regular intervals from the network.
- Care for the equipment provided and operate all components appropriately.

I also agree that I WILL NOT

- · Reveal any private information.
- Attempt to retrieve, view or disseminate any obscene, offensive, pornographic or illegal material.
- Send offensive, racist, sexiest or inappropriate messages.
- Send anonymous or falsely addressed electronic mail.
- Bring Narangba Valley SHS into disrepute in any way whatsoever.
- Allow anyone else to use my login or give my password to anyone else.
- Use or tamper with another student's account in any way.
- Download or print information without permission.
- · Use chat channels without permission.
- · Use my Internet access for business purposes, political purposes or for financial gain.
- Tamper with the school's network in any way.
- Attempt to bypass security.

Student

I have read and understand the agreement and agree to adhere to all of the guidelines. I further understand that any violations of this agreement will result in the immediate suspension of my network and Internet access during ALL CLASSES and OUT OF CLASS ACCESS TIMES, and that as a result of such violations further disciplinary measures may by taken.

Signature of Student	Date
Parent / Guardian	
services provided by Narangba Valley State High	am the parent / guardian of the above-named student. I have e permission for my son / daughter to use the network and internet a School and understand that he / she is required to follow the above the agreement may by prevented from using the school's computers
•	son / daughter to access information on the internet that is inappropriate will always exercise their duty of care, appropriate use is the student's
Signature of Parent	

FORM 7

RESPONSIBLE USE AGREEMENT

The following is to be read and completed by both the STUDENT and PARENT/CAREGIVER:

- I have read and understood the BYOx Charter. This document is located on our website-
- https://narangbavalleyshs.eq.edu.au/supportandresources/formsanddocuments/documents/bring%20your%20own
- %20device/student-byox-charter-guide-for-parents-and-students.pdf
- I have read the school Responsible Behaviour Plan This document is located on our website-
- I agree to abide by the requirements outlined by both documents.
- I am aware that non-compliance or irresponsible behaviour, as per the intent of the BYOx Charter and the Responsible Behaviour Plan, will result in consequences relative to the behaviour.

Student name (please print)	Year
Student ID Number	
Student's signature	Date
Parent / Guardian name (please print)	
Parent / Guardian signature	Date

If you already have a USI number, do not create another one. Please provide the existing USI below.

Step 1		A USI is for life! You only have to create it	once.	
	If you have done training s	ince 2015, you probably have a USI. If you a	are unsure, go to <u>Find my USI</u>	
	page to check.			
	You will need to provide ide	entification to create a USI.		
	One of the following are ac			
	Australian Passpor			
	Non-Australian Pa			
	 Australian Birth Ce 			
	Australian Drivers			
	Medicare Card	Electrics		
	Certificate of Register	stration by Decent		
	Citizenship Certific			
	ImmiCard	ale		
Stop 2	Go to: https://www.usi.gov.	ou/	USI Helpdesk – 1300 857 536	
Step 2	Click 'Create my USI' unde		USI Helpdesk – 1300 657 536	
Step 3	Click on 'Create my USI'	r the student heading		
Step 4		oditions > Novt		
Step 5	Agree to the terms and cor		-b -t 7	
Step 6	Click 'Create USI' and complete all necessary information until you reach step 7.			
Step 7		word and questions for security.		
Step 8	Your USI will now be displayed on the screen.			
Step 9	Write down this number			
		form at the bottom of this page.		
		enter into your phone for safe keeping. You	will need to give this number to	
		providers you enrol with.		
		r handwriting is clear and the letters / number	ers are easy to decipher e.g.S	
		lar when hand written.		
Step 10		n below. Please double check all details are		
	Your USI will also be s	ent to the email address you provided in you	ur application form.	
		Please complete the section below		
	Full Name		Please write your USI number	
	s is it appears on birth cert)		below	
Date of Bi	rth			
Year Leve	el	7		
	l hereby give permission f	or Queensland Government to verify my	USI as indicated above	
Student Name		Student Signature	Date	

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FORM 19

APPLICATION FOR AFL ACADEMY CLOSES 5/8/2022

Student Name				
Parent Name				
Address				
Date of Birth				
Current School				
Have you played AFL for a club?		Yes 🔲	No 🗆	
If yes please list current club you are p	playing with;			
If yes how long have you played for;	If yes how long have you played for;			
Please list all achievements in AFL you have;				
Please list your experience and the position you play;				
Goals for the future;				
Please attach any of the following you may have:				
Certificates / Competitions Club Membership				
Letter of Recommendation				
Parent signature:				-



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Introduction to the State School Consent Form (attached) for Narangba Valley State High School.

This letter is to inform you about how we will use your child's personal information and student materials. It outlines:

- what information we record
- how we will use student materials created during your child's enrolment.

Examples of personal information which may be used and disclosed (subject to consent) include part of a person's name, image/photograph, voice/video recording or year level.

Your child's student materials:

- are created by your child whether as an individual or part of a team
- may identify each person who contributed to the creation
- may represent Indigenous knowledge or culture.

Purpose of the consent

It is the school's usual practice to take photographs or record images of students and occasionally to publish limited personal information and student materials for the purpose of celebrating student achievement and promoting the school and more broadly celebrating Queensland education.

To achieve this, the school may use newsletters, its website, traditional media, social media or other new media as listed in the 'Media Sources' section below.

The State School Consent Form may, at your discretion, provide consent for personal information and a licence for the student materials to be published online or in other public forums. It also allows your child's personal information and student materials to be presented in part or alongside other students' achievements.

The school needs to receive consent in writing before it uses or discloses your child's personal information or student materials in a public forum. The attached form is a record of the consent provided.

It should be noted that in some instances the school may be required by the *Education* (*General Provisions*) Act 2006 or by law to record, use or disclose the student's personal information or materials without consent (e.g. assessment of student materials does not require further consent).

Voluntary

There will not be any negative repercussions for not completing the State School Consent Form or for giving limited consent. All students will continue to receive their education regardless of whether consent is given or not.

Consent may be limited or withdrawn

Consent may be limited or withdrawn at any time by you.

If you wish to limit or withdraw consent please notify the school in writing (by email or letter). The school will confirm the receipt of your request via email if you provide an email address.



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If in doubt, the school may treat a notice to limit consent as a comprehensive withdrawal of consent until the limit is clarified to the school's satisfaction.

Due to the nature of the internet and social media (which distributes and copies information), it may not be possible for all copies of information (including images of student materials) once published by consent, to be deleted or restricted from use.

The school may take down content that is under its direct control, however, published information and materials cannot be deleted and the school is under no obligation to communicate changes to consent with other entities/ third parties.

Media sources used

Following is a list of online and social media websites and traditional media sources where the school may publish your child's personal information or student materials subject to your consent.

- School website: https://narangbavalleyshs.eq.edu.au
- Facebook: [https://www.facebook.com/Narangba-Valley-State-High- School-618737518223522/
- YouTube: https://www.youtube.com/channel/UCGDIH7N9j32LBJ6LHr3UaZg
- Instagram: https://www.instagram.com/valley.hi/
- · Local newspaper
- School newsletter
- Traditional and online media, printed materials, digital platforms' promotional materials, presentations and displays.

The State School Consent Form does not extend to P&C run social media accounts or activities, or external organisations.

Duration

The consent applies for the period of enrolment or another period as stated in the State School Consent Form, or until you decide to limit or withdraw your consent.

During the school year there may be circumstances where the school or Department of Education may seek additional consent.

Who to contact

To return a consent, express a limited consent or withdraw consent please contact **Enrolment / enrolment@narangbavalleyshs.eq.edu.au**.

Relevant House Deputy should be contacted if you have any questions regarding consent. Please retain this letter for your records and return the signed consent form.



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State School Consent Form

	State School Consent Form
IDE	ENTIFY THE PERSON TO WHOM THE CONSENT RELATES
•	Parent/carer to complete Mature/independent students may complete on their own behalf (if under 18 a witness is required).
(a)	Full name of individual:
(b)	Date of birth:
(c)	Name of school:
(d)	Name to be used in association with the person's personal information and materials* (please select):
	Full Name First Name No Name Other Name
PE	RSONAL INFORMATION AND MATERIALS COVERED BY THIS CONSENT FORM
(a)	Personal information that may identify the person in section 1:
	▶ Name (as indicated in section 1) ▶ Image/photograph ▶ School name
	▶ Recording (voices and/or video) ▶ Year level
(b)	Materials created by the person in section 1:
	▶ Sound recording ▶ Artistic work ▶ Written work ▶ Video or image
	▶ Software ▶ Music score ▶ Dramatic work
AP	PROVED PURPOSE
If o	consent is given in section 6 of the form:
•	The personal information and materials (as detailed in section 2) may be recorded, used and/or disclosed (published) by the school, the Department of Education (DoE) and the Queensland Government for the following purposes:
	 Any activities engaged in during the ordinary course of the provision of education (including assessment), or other purposes associated with the operation and management of the school or DoE including to publicly celebrate success, advertising, public relations, marketing, promotional materials, presentations, competitions and displays.
	 Promoting the success of the person in section 1, including their academic, sporting or cultural achievements.
	- Any other activities identified in section 4(b) below.
•	The personal information and materials (as detailed in section 2) may be disclosed (published) for the above purposes in the following:
	 the school's newsletter and/or website; social media accounts, other internet sites, traditional media and other sources identified in the 'Media Sources' section of the explanatory letter (attached);
	 year books/annuals; promotional/advertising materials; and presentations and displays.
ΤIΛ	MEFRAME FOR CONSENT
Sc	chool representative to complete.
(a) (b)	Timeframe of consent: duration of enrolment. Further identified activities not listed in the form and letter for the above timeframe:
LIN	MITATION OF CONSENT

The Individual and/or parent wishes to limit consent in the following way:

6 CONSENT	AND AGREEMENT
▶ CONSENTE	R – I am (tick the applicable box):
parent/carer o	of the identified person in section 1
	person in section 1 (if a mature/independent student or employee including volunteers) presentative for the Indigenous knowledge or culture expressed by the materials
about it and any consent to the so identified in section By signing below materials (detailed purpose. I acknot property incorports an author or performs in section by the	explanatory letter, or it has been read to me. I have had the opportunity to ask questions questions that I have asked have been answered to my satisfaction. By signing below, I chool recording, using and/or disclosing (publishing) the personal information and materials ion 2 for the purposes detailed in section 3. y, I also agree that this State School Consent form is binding. For the benefit of having the ed in section 2) promoted as DoE may determine, I grant a licence for such materials for this eveloge I remain responsible to promptly notify the school of any third party intellectual rated into the licensed materials. I accept that attribution of the identified person in section 1 as former of the licensed materials may not occur. I accept that the materials licensed may be er materials and the licensed materials may not be reproduced in their entirety.
Print name of s	student
Print name of c	consenter
Signature or ma	ark of
consenter	Date
Signature or ma	ark of student (if
_	Date
applicable)	
,	
	TANCES
EPECIAL CIRCUMS the form is required ndividual student; or	TANCES I to be read out (whether in English or in an alternative language or dialect) to a parent/carer or when the consenter is an independent student and under 18 the section below must be
EPECIAL CIRCUMS the form is required ndividual student; or ompleted.	I to be read out (whether in English or in an alternative language or dialect) to a parent/carer or
in the form is required adividual student; or ompleted. WITNESS and State I have witnessed State School Cornhas had the opposite the second control of t	to be read out (whether in English or in an alternative language or dialect) to a parent/carer or when the consenter is an independent student and under 18 the section below must be for consent from an independent student or where the explanatory letter
Frecial Circums The form is required ndividual student; or ompleted. WITNESS and State I have witnessed State School Corhas had the opponerson understood	I to be read out (whether in English or in an alternative language or dialect) to a parent/carer or when the consenter is an independent student and under 18 the section below must be — for consent from an independent student or where the explanatory letter School Consent Form were read the signature of an independent student, or the accurate reading of the explanatory letter and the insent Form was completed in accordance with the instruction of the potential consenter. The individual ortunity to ask questions. I confirm that the individual has given consent freely and I understand the
in the form is required adividual student; or ompleted. WITNESS and State I have witnessed State School Cord has had the opponents of the control of the c	to be read out (whether in English or in an alternative language or dialect) to a parent/carer or when the consenter is an independent student and under 18 the section below must be — for consent from an independent student or where the explanatory letter School Consent Form were read the signature of an independent student, or the accurate reading of the explanatory letter and the insent Form was completed in accordance with the instruction of the potential consenter. The individual prunity to ask questions. I confirm that the individual has given consent freely and I understand the od the implications.
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Privacy Notice

The Department of Education (DoE) is collecting your personal information on this form in order to obtain consent for the use and disclosure of the student's personal information to facilitate registration and use of third party web based software identified on the form. The information will be used and disclosed by authorised school employees for the purposes outlined on the form.

The information will be used and disclosed by authorised school employees for the purposes outlined on the form. Student personal information collected on this form may also be used or disclosed to third parties where authorised or required by law. This information will be stored securely. If you wish to access or correct any of the personal student information on this form or discuss how it has been dealt with, please contact your student's school in the first instance.

Respect, Integrity & Commitment –



FORM 20

APPLICATION FOR NETBALL ACADEMY Closes 5/8/2022

Student Name				
Parent Name				
Address				
Date of Birth				
Current School				
Do you currently play netball for lf yes how long have you playe		Yes 🔲	No	
Please list current club you are	playing with;			
Please list all achievements in	Netball you have;			
Please list your experience and	d the position you play;			
Goals for the future;				
Please attach any of the following you	may have:			
Certificates / Competitions Club Membership				
Letter of Recommendation				
Parent signature:				
Student signature:			Date:	/



Narangba Valley State High School

Harris Avenue, NARANGBA Qld 4504 Phone: (07) 3385 4555 Fax: (07) 3385 4500 Email: the.principal@narangbavalleyshs.eq.edu.au



- Respect, Integrity & Commitment

FORM 18



Science and Mathematics Academy (SMA)

Application for SMA is on line

https://narangbavalleyshs.eq.edu.au/enrolments/enrolling-at-our-school

Closing date for applications is **Wednesday 22**nd **June Midday** (no applications will be accepted after this date and time).

Entrance Test will be held on **Wednesday 20th July** – only for students who have submitted an application and made payment.

All students making application for SMA must also complete an enrolment book if they reside within catchment or an Expression of Interest Form if applying from out of catchment area.

Any questions regarding this process please email:

Secondary applications (entering years 7 – 10) – <u>Secondary-SMA@narangbavalleyshs.eq.edu.au</u>





Phone: (07) 3385 4555 Fax: (07) 3385 4500 Email: the.principal@narangbavalleyshs.eq.edu.au



- Respect, Integrity & Commitment -



FORM 21

APPLICATION FOR MUSIC ACADEMY - Closes 24/6/2022

Student Name				
Parent Name				
Address				
Date of Birth				
Current School				
Are you currently in a school / M		Yes	No 🗆	
Please list all achievements in N	lusic you have;			_
Please list your experience in m	usic e.g. what instrume	nt you play;		
Goals for the future				
Please attach any of the followir	ng documents / evidenc	e:		
Certificates / Competitions Exam Results				
Letter of Recommendation				
Parent signature:				
Student signature:			Date:	-/



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Respect, Integrity & Commitment



FORM 22

APPLICATION FOR INSTRUMENTAL MUSIC

Narangba Valley State High School's Instrumental Music Program (IMP) is a vibrant and exciting co-curricular component of school life. Each student participates in a weekly lesson and rehearsal in an ensemble, which caters to their music ability. Performances are likely to include school events, tours / camps, competitions, festivals and local shows. There is a yearly levy for this program.

IM students are highly regarded in this school community. Most ensemble members are Gold Level students and all participants make lasting friendships across all year levels. Please refer to the Curriculum Book on costs relating to the IMP.

Students who loaned large instruments from their previous school (i.e. Bass clarinet, trombone, euphonium, tuba, double bass) are most welcome to borrow NVSHS instruments. This is subject to availability.

Please complete the form below and return with your child's enrolment.

Student Name	
Parent Name	
Address	
Phone	
Email Address	

By completing the section below, instrumental music teachers will be able to match your child with others of similar standard in ensembles and lessons.

Instrument	Standard of Excellence Book (1,2,3 or further) Approx Page	Own Instrument	Previous School	
	(1,2,3 of further) Approx Page			
Example – Trumpet	Book 2, Page 17	Yes	NVSS	

Please note that the instrumental music at Narangba Valley State High School does not include Piano, Guitar or Vocal.

I consent to enrol my child in the Narangba Valley State High School Instrumental Music Program. I agree to pay the levee for this Program.

Parent signa	ture		 			
Print Name _						
Date	/	/20				



Narangba Valley State High School

Harris Avenue, NARANGBA Qld 4504 Phone: (07) 3385 4555 Fax: (07) 3385 4500 Email: the.principal@narangbavalleyshs.eq.edu.au



FORM 15

If yes please specify?

ENGLISH SECOND LANGUAGE

Please complete this form so that the school can identify students who may be able to receive support from the ESL coordinator. Student Name Year Level Previous School _____ Parent Name _______ Contact Details _____ Email Address Yes D No D 1. Does the student speak a language other than English at home? Yes \square No \square 2. Does one or both of the parents speak another language at home? Yes \square No \square 3. Was one or both parents born in English – Speaking country? Yes D No D 4. Was the student born in a non – English speaking country? 5. Has the student spent two years or more living overseas where English is not the main language? Yes \square No \square 6. Was the student born in Australia, but the family speaks another language at home for some or all of the time? Yes □ No □ Yes □ No □ 7. Is the student fee paying on a "dependent Visa

FORM 14

Individual Learning Centre Referral

Date of Birth Previous School Parent Name Contact Details Email Address Diagnosed disabilities Information Does your student have a diagnosed medical or learning condition associated with their Learning Support needs? E.g. Dyslexia, diabetes, mental health issues, ASD, ID, VI, PI, HI, SLI,					
Parent Name Contact Details Email Address Diagnosed disabilities Information Does your student have a diagnosed medical or learning condition associated with their Learning Support needs?	Previous School				
Contact Details Email Address Diagnosed disabilities Information Does your student have a diagnosed medical or learning condition associated with their Learning Support needs?					
Email Address Diagnosed disabilities Information Does your student have a diagnosed medical or learning condition associated with their Learning Support needs?	Parent Name				
Diagnosed disabilities Information Does your student have a diagnosed medical or learning condition associated with their Learning Support needs?	Contact Details				
Does your student have a diagnosed medical or learning condition associated with their Learning Support needs?	Email Address				
Does your student have a diagnosed medical or learning condition associated with their Learning Support needs? E.g. Dyslexia, diabetes, mental health issues, ASD, ID, VI, PI, HI, SLI.	Diagnosed disabilities Informa	tion			
	Does your student have a diag E.g. Dyslexia, diabetes, menta	nosed medical or learning co al health issues, ASD, ID, VI,	ondition associated with their PI, HI, SLI,	Learning Support	needs?
Yes No D	Yes		No		
If yes please provide details.	If yes please provide details.				
Reports attached Yes \(\square\) No \(\square\)	Reports attached			Yes 🗆	No 🗆
Would you like a member of the ILC team to contact you regarding your students support needs?	Would you like a member of th	e ILC team to contact you re	garding your students suppo	rt needs?	
Yes No D	Yes		No		
Further information / concerns:	Further information / concerns	:	l		

Administration of medications in Queensland state schools: Information for parents/carers and health practitioners

This information sheet provides advice for parents/carers and their child's health practitioner/s regarding the documentation required for Queensland state schools to safely administer medication to students while they are at school or school-related activities.

All medications you provide for the school to administer to your child must be prescribed by a qualified health professional who is authorised to prescribe medications under the Health (Drugs and Poisons) Regulation 1996 (Qld) e.g. doctor, dentist, optometrist. State schools refer to these professionals as 'prescribing health practitioners' (practitioners).

A blank Medication order to administer 'as-needed' medication at school is provided on the last page.

Information for parents/carers

1. For all medications

For medication to be administered during school hours and/or during school-related events, provide the school with:

- a completed <u>Consent to administer medication</u> form.
- the medication with an attached pharmacy label, in its original container, with intact packaging.

2. Where no additional information is required from your practitioner

If your child requires medication at a routine time (e.g. 11am every day), the pharmacy label attached to the medication provides the school with the instructions from the doctor/dentist needed to safely administer the medication. Examples of routine medication include Ritalin, antibiotics, eye/ear drops, enzyme tablets and ointments.

No other written information from the prescribing health practitioner is required.

3. Where you will need additional written information from your practitioner

As well as using the pharmacy label instructions, the school will need additional written information from the prescribing health practitioner if your child:

- a. **requires medication as an emergency response**. Depending on your child's health condition, your doctor will need to complete:
 - an Asthma Action Plan and/or
 - an Anaphylaxis Action Plan and/or
 - written instructions if your child has more complex health needs.
- b. requires insulin. Your doctor will need to complete a medication order for insulin.
- c. **requires medication 'as-needed' (but not as an emergency response)**. Your health practitioner will need to complete a *Medication order to administer 'as-needed' medication at school* (see page 3).
- d. has their dosage changed from that on the pharmacy label. Your health practitioner will need to write a letter for the school explaining the changes. To assist the school in safely administering the medication to your child, you are encouraged to have your pharmacist update the pharmacy label attached to the medication with the new dosage as soon as possible.

Form 12A (3 pages)

Information for prescribing health practitioners

Queensland state schools administer medications authorised by a qualified health practitioner (registered with the Australian Health Practitioner Regulation Agency) to support students' health needs if it is deemed that the administration of this medication is essential during school hours or school-related activities.

No further information or medical authorisation is required by the school where prescription medications are to be administered at a routine time during the day, have been dispensed by a pharmacist, and there is sufficient information on the pharmacy label to enable safe administration.

However, if you are prescribing medication as described below, please complete the relevant documentation and provide it to the parent/carer (or to the student if they are 18 years of age or older).

1. Emergency medication

Where medication is to be taken as an emergency response for asthma or anaphylaxis, please complete:

- an Asthma Action Plan and/or
- an ASCIA Anaphylaxis Action Plan.

2. Insulin

Due to the complexity of diabetes management, the school will require:

- a medication order for insulin (which provides medical authorisation) and
- a diabetes management plan developed by yourself and/or the diabetes treating team.

3. As-needed medication

Where medication is to be taken as needed in response to a student's symptoms (e.g. toothache, migraine), the school requires clear instructions to enable non-medically trained school staff to safely administer the medication.

The school will require:

- specific written instructions e.g. where school staff are required to administer medication as part of a health procedure (e.g. administration of medication through a gastrostomy tube) or
- a completed Medication order to administer as-needed medication at school (see page 3).

If you make subsequent changes to the student's medication dosage, or if instructions change from that described in a *Medication order to administer 'as-needed' medication at school* you have completed, please:

- update this medication order, initial and date the changes (if they are minor) or
- complete a new medication order.

4. Over-riding pharmacy label instructions

Where a student has been prescribed medication, but the medication dosage requirements change from that printed on the pharmacy label (e.g. from 1 tablet of Ritalin to ½ tablet of Ritalin), the school needs additional written information that includes all of the following:

- the name of the student
- the name of the medication
- the dosage change and the date the change is to be implemented from
- the prescribing health practitioner's signature and date, and
- attached evidence of the medical practice i.e. on a letterhead or stamp/sticker.

Please encourage the parent/carer to have their pharmacist update the pharmacy label attached to the medication with the new dosage as soon as possible.

Privacy Statement

The Department of Education (DoE) is collecting this personal information for the purpose of enabling school staff to administer medication to the student listed below while at school or during school-related activities. This information will only be accessed by authorised departmental employees. In accordance with section 426 of the *Education (General Provisions)* Act 2006 (regarding student's personal information) and the *Information Privacy Act 2009* (parent/carer's personal information) this information will not be disclosed to any other person or body unless you have given DoE permission or DoE is required or authorised by law to disclose the information.

Medication order to administer 'as-needed' medication at school

The following information will be used by Queensland state school staff to support the administration of 'as-needed' medication to the student named below at school or during school-related activities (e.g. camps, excursions).

Prescribing health practitioner to complete <u>all</u> sections below:								
Student name			Date of birth					
Medication			Dosage and route					
This medication is to be administered as: (please select one or both)								
□ an emergenc	y response		□ a non-emerge	ency response				
Administer the medication when these signs and symptoms occur:								
The maximum number	r of dosages allowed over	a 24-hour pe	eriod are:					
The minimum length of	of time allowed between do	osages is:						
The expected respons	se the student would have	after having	this medication ac	dministered is:				
If there is no response	e in approximately mi	nutes, take t	he following actior	n [e.g. call ambulance]:				
Please note: The sch administration.	nool will notify the parent/ca	arer if the stu	ıdent displays any	suspected side effects following				
Please indicate if add	itional information is attach	ed (if require	ed): YES □	NO □				
Name of prescribing h	nealth practitioner:	Medical pra	actice stamp/sticke	er:				
Signature of prescribi	ng health practitioner:							
Date:								
Review date of this m	edication order:							

FORM 12B - (3 Pages)

Consent to administer medication

PLEASE NOTE:

For medication to be administered at school or during school-related activities, there must be medical authorisation for the student to have that medication, and the medication must be in its original container with intact packaging.

Examples of medical authorisation include:

- a pharmacy label with both the student's and doctor's name on it;
- a signed letter from a doctor;
- a medication order from a dentist;
- an Action Plan signed by a doctor or nurse practitioner.

See below for examples of health conditions, medications and associated documentation:

Health condition/ reason for medication	Example of medication	Documentation completed by doctor or other prescribing health practitioner
Asthma	Asthma puffer	Asthma action plan
Anaphylaxis	EpiPen	ASCIA Anaphylaxis Action Plan
Diabetes	Insulin injection, insulin pump	Department of Education Medication order to administer 'as-needed' medication at school or medication order or diabetes management plan or other written instructions from prescribing health practitioner
Other types of emergency medication e.g. for seizures	Midazolam	Department of Education Medication order to administer 'as-needed' medication at school
Medication required 'as needed' for minor or non- emergency symptoms	Ointment for skin allergies, antihistamines	Department of Education Medication order to administer 'as-needed' medication at school
Changes to dosage (e.g. from ½ to 1 tablet)	Ritalin	Written instructions from prescribing health practitioner (e.g. doctor)

1. To request that the school administer medication to a student

- 1) Complete Section A (page 2).
- 2) Provide the school with the medication in the original container with intact packaging.
- 3) Provide the written medical authorisation (e.g. completed pharmacy label, medication order, action plan) completed and signed by the prescribing health practitioner.
- 4) Make an appointment with the principal/delegate if:
 - the student requires medication as an emergency response;
 - you would like the student to self-administer their medication;
 - the student has complex health support needs or requires other support strategies; or
 - you have any concerns about the student's health which may affect their schooling.

2. To request a student self-administer their medication

1) Complete Section A (page 2) and Section B (page 3).



Consent to administer medication

Privacy Statement

The Department of Education (DoE) is collecting this personal information for the purpose of enabling school staff to administer medication to the nominated student, or to support a student to self-administer their medication while at school or during school-related activities. This information will only be accessed by authorised departmental employees. In accordance with section 426 of the *Education (General Provisions) Act 2006* (regarding student's personal information) and the *Information Privacy Act 2009* (parent/carer's personal information) this information will not be disclosed to any other person or body unless DoE has been given permission or is required or authorised by law to disclose the information.

Section A: Complete the details below:

NOTE: This form only collects information for one (1) medication. If more than one medication is required, please complete a separate form for each medication.

Student name			Date of birth			
Parent/carer name			Phone number			
 I consent to the following medication being administered (as per the instructions on the pharmacy label and/or any additional written instructions) to the student named above during school or school-related activities. I authorise school staff to contact the prescribing health practitioner or pharmacist (as listed on the medication's pharmacy label or in other relevant medical authorisation) for the purpose of seeking specific advice or clarification on the administration of this medication to this student. 						
Name of medication						
I confirm that the medication provided to the school (as listed above): ☐ is medically authorised (e.g. has been prescribed by a doctor, dentist, optometrist or nurse practitioner) ☐ is in the original dispensed container with intact packaging ☐ has the student's and doctor's names on the pharmacy label (if there is no other written evidence of medical authorisation) ☐ is current/in-date (The expiry date of the medication is / /).						
The medication is requir	ed:	If Yes to any questions	, complete the follo	wing:		
(a) routinely (e.g. 11am every day)	□ No □ Yes⇒	Administer at: a required) Monday Tue				
(b) for a short time only (e.g. only for 2 weeks)	□ No □ Yes⇒	Start date:/_/_ End date:/_/_				
(c) to manage a health condition by following a current action plan or health plan	□ No □ Yes⇒	Is the medication for: ☐ asthma ☐ anaphylaxis ☐ diabetes ☐ epilepsy ☐ cystic fibrosis ☐ other (describe)				
(d) 'as needed' to treat minor or non-emergency symptoms	□ No □ Yes □ I understand that before the school administers this medication, if they are not aware of when this medication was most recently given to this student, I will be contacted to provide this information.					
Has this student previously	y shown any side	effects after taking this r	nedication?		Yes □ No □	
If Yes , describe:						
Parent/carer/student signature			Date			
If the student is to self-administer this medication, also complete Section B NOTE: Controlled drugs cannot be self-administered.						



FORM 12B – (3 Pages)

Section B: Detail	ls for student s	elf-adn	ninistration of medica	tion:			
In all cases and at any time, the principal/delegate may disallow student self-administration for health and/or safety reasons.							
Student name	ame Date of birth						
I confirm that the medication at the confirm that th		dent, coi	mpetent and can safely a	dminister the	right dos	se of their own	
I confirm that th	ne student can sto	re their r	medication securely.				
medication's ph	narmacy label or ir	n other r	scribing health practition elevant medical authoris on of this medication by t	ation) for the p			
Health condition							
☐ Asthma - second students only	lary school	NOTE	prove for the student to s : The school will need a of from the standard asthm	copy of the stu	ident's A		
Health condition		I seek	approval from the princip	al/delegate fo	r the stu	ident to self-administer:	
☐ Asthma		☐ their	r asthma medication <i>(foll</i>	owing a curre	nt action	plan/health plan)	
☐ Anaphylaxis		☐ their	r adrenaline auto-injector	(following a c	urrent a	ction plan/health plan)	
☐ Diabetes		☐ their	r medication <i>(following a</i>	current health	plan)		
☐ Cystic fibrosis		☐ their	r medication <i>(following a</i>	current health	plan)		
□ Other		☐ their	r medication <i>(following a</i>	current health	plan)		
Parent/carer/stud	dent signature			Date			



Narangba Valley State High School Culture





Respect

Integrity

Commitment

Narangba Valley State High School operates a vertical house structure. Within each house there are individual Home Groups.

Your Home Group and Home Group teacher are your first port of call for any questions you have when you are at school, and your Head of House and House Deputy will be with you for your entire school journey. Your Home Group will contain students from all year levels, so it's also a great way to get to know a wide range of students and seek support when you need it.

Traditionally, students from the same family are placed in the same House. We have five houses. Their names are part of indigenous culture and the totems are Australian animals.





BIDARA



EARA WI









House Mottos



"Leaping Boundaries"



"The sting is in our tail"



"Take a bite out of life"



"Strong and determined"



"With precision we strike"