

Student Name: _____

GENERAL PERMISSION 2026

I give permission (please tick):

- To release my child's emergency contact details and medical information to the Bus line to allow students to travel on school transport.
- For my child to travel in the school bus or a teacher's car providing the driver is legally qualified and the car complies with all laws relating to registration, insurance and service ability.
- For teachers/aides to supervise the showering of my child after sport/swimming or toilet accidents etc.
- For my child to go on local excursions (within Wonthaggi – map available on request), provided there is reasonable care and supervision.
- For my child to participate in the school's Health & Human Relations program as approved by School Council.
- For my child, as part of the school program, to be included in community access such as shopping excursions under teacher/aides supervision.
- For my child to receive from teachers/ES staff, necessary assistance for the treatment of wounds including administration of basic first aid including paracetamol or ibuprofen for temporary pain relief. Staff will endeavour to contact parents before administering pain relief.
- I give permission for my child to be checked for head lice.
- For my child to have sunscreen administered when staff believe it is appropriate.
- For my child to access school based allied health (therapy) staff, as part of their educational program.

PHOTOGRAPH USAGE PERMISSION

The school requires parents/carer permission for publication of student's photos, school work or DVD production in the media.

Please indicate (tick) below what your child can participate in:

- Community media, such as **FACEBOOK / NEWSPAPERS / RADIO**
- School photos including **INDIVIDUAL / CLASS / GROUP**
- Bass Coast Specialist School Newsletter/Web page
- School brochures

Signature Parent/Carer _____ **Date:** _____