Toogoolawah State High School
Student Participation in Chaplaincy Program
Consent Form

This School community provides a Chaplaincy Program endorsed by the School’s Parents and Citizens’ Association and available on a voluntary basis to all students. Information about the School’s Chaplaincy Program is on the School’s website. The Chaplain is involved in a range of activities at this School which are free of religious or spiritual content.

Parent consent, or in some cases, the student’s consent is required for participation in specific activities with religious or spiritual content. If the Principal decides that the student has the appropriate level of maturity and understanding to give informed consent, the student must sign this form themselves. Otherwise, the parent must sign the form on the student’s behalf.

Please complete the information below:

<table>
<thead>
<tr>
<th>Parent Name/s</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Name (in full)</td>
</tr>
<tr>
<td>Student Name (in full)</td>
</tr>
<tr>
<td>Student Name (in full)</td>
</tr>
</tbody>
</table>

The following voluntary student activities with religious or spiritual content require written consent:

- Student support
- Individual prayer
- Small group meetings for religious/spiritual support

If you **DO** wish to give consent for this student to participate in the above activities, please tick boxes (a) AND (b):

- (a) I give consent for this student to participate in activities with religious or spiritual content
- (b) I understand that, where I agree that the student can participate in the Chaplaincy Program, this information will be passed on to the Chaplain.

OR, if you **DO NOT** wish to give consent for the student to participate in the above activities please tick box (c)

- (c) I do not give consent for the student to participate in activities with religious or spiritual content.

The school newsletter and website will advise of any additional activities with religious or spiritual content in the school, prior to commencement.

Parent Signature ____________________________ Date _____________

Student Signature (if appropriate) ____________________________ Date _____________

**Privacy Notice**

The Department of Education and Training is collecting student’s personal information in order to determine student participation in the school’s Chaplaincy Program. This information will only be accessed by the school principal and, if the student is participating in the program, the school chaplain. Student’s personal information will be recorded, used and disclosed in accordance with s.426 of the Education (General Provisions) Act 2006 (Qld) and will not be given to any other person or agency unless you have given the department permission or the disclosure is otherwise required or permitted by law.

The Information Privacy Act 2009 (Qld) applies to the department’s collection, use and disclosure of the personal information of persons other than students.