



Rosebank Public School

340 Rosebank Road

ROSEBANK NSW 2480

Telephone: 61 2 6688 2126

www.rosebank-p.schools.nsw.edu.au

2022 Annual School Update Information

9 February 2022

School Transport

Please record the form of transport via which your child will usually travel home from school on each school day:

Student's Name	Monday	Tuesday	Wednesday	Thursday	Friday
<i>Jill Sample</i>	<i>Ken's Bus</i>	<i>Ken's Bus</i>	<i>Ken's Bus</i>	<i>Ken's Bus</i>	<i>Picked up: Nana</i>

If there is a change of transport on any day, please let the school know by telephone or in writing before 2.00pm. If no advice has been received from parents, children will travel home via the form of transport shown in our records.

Permission for Students to Leave Site

From time to time, our students leave the school site to walk to other local sites (e.g.: the Preschool and the Creek). This consent relates only to occasional outings, not our regular Bush School, for which you will receive a separate form.

I consent to my child leaving the school site to walk (accompanied by a teacher) locally in the Rosebank area.

Parent/Carer Name: _____ (Please print)

Parent/Carer's Signature: _____ Date: _____

Permission to Publish/School Communication

Please tick the box to indicate your consent for Rosebank Public School to publish the image of your child/children's image and full name, or a digital recording containing their image and full name, on our website, newsletter, school promotional material or other publication available either in print or on the internet.

Student's Name	Tick for YES	Tick for NO

Please email me a copy of the school newsletter

Please email me a copy and send home a hard copy as well

I would prefer a hard copy of the newsletter only.

Parent/Carer Name: _____ (Please print)

Parent/Carer's Signature: _____ Date: _____

Medication/First Aid

Should your child need to take any prescription medication while at school, it is DET policy that the parent must come into the office and complete Dept of Education Medication Administration Permission form.

Prescription medication should be clearly labelled (pharmacy label) with the name of the student and the student's medical practitioner printed on it.

The School occasionally administers band aids and /or applies sunscreen.

Please indicate on the line below if your child has an allergy to band aids or any brand of sunscreen.

Allergies

- No. To my knowledge, my child is not allergic to anything.
- Yes, my child is allergic to _____.

Should he/she experience an allergic reaction at school, the first symptoms are likely to be:

In such a situation, the school should: _____

Staff will work cooperatively with parents to develop a Health Care Plan to support any students with asthmatic or anaphylactic allergies. Please let us know if your child has an asthma or anaphylactic health care plan through their medical practitioner.

Emergencies/Playground Equipment

- I understand that, should my child suffer an accident or serious illness while at school and the school is unable contact me, I give permission for the principal (or principal representative) to contact an ambulance or seek medical assistance. Should the school call an ambulance to transport my child to a medical facility, the costs of initial transport are covered by the NSW Government.
- I give permission for my child to play on school fixed playground equipment within the school grounds.

Parent/Carer Name: _____ (Please print)

Parent/Carer's Signature: _____ Date: _____

Movie/Media Viewing

From time to time, children have the opportunity to watch a movie together, either as a special treat or as part of their educational program. These movies are G rated. If a movie is relevant to the curriculum and rated PG, a special note will be sent home to parents for consent.

Bringing Devices to School

The school is aware students may have parent permission to have devices coming to school due to long bus travel times or transporting belongings between households in shared custody situations. It is a requirement for students to check their devices into the school office on arrival at school and to collect their device from the office at the end of the day. The school does not take any responsibility for any lost or damaged items nor the content viewed on the child's device in transit. This remains a parent responsibility.

I am aware that my child can sign in and check out a device into the school office each day and that the parent is responsible for monitoring content on their child's device and that the school is not responsible for any loss or damage of a device.

Parent/Carer Name: _____ (Please print)

Parent/Carer's Signature: _____ Date: _____

Family Contact Information

To ensure that our records are current and correct, please record your contact information below. Please provide contact details for all parents/carers. That is, where you have shared cared arrangements, please provide contact details for all residences and all relevant phone contacts.

Student/s' Name/s	
Current residential address	
Current postal address	
Current telephone	Home: Work: Mobile:
Email address:	

Student/s' Name/s	
Current residential address	
Current postal address	
Current telephone	Home: Work: Mobile:
Email address:	

Parents email addresses may be used by teachers or administration staff to communicate important school information. For example, school newsletters, advice of school closure in the case of flooding or fire, to distribute school surveys and to provide class updates. The school will limit its use of email communication but would greatly appreciate the ability to communicate with all families via email.

Emergency Contacts

If we are unable to contact you, who may we call in case of emergency. Please make sure this emergency contact person is a local resident in case your child needs to be collected from school or if we need the emergency contact person to attend the school grounds.

EMERGENCY CONTACT 1	
Contact's Name	
Telephone	Home: Work: Mobile:
Relationship to child/children	
EMERGENCY CONTACT 2	
Contact's Name	
Telephone	Home: Work: Mobile:
Relationship to child/children	

I understand and agree that if I cannot be contacted in the event of flooding, fire or an emergency, one of my emergency contacts will be contacted and my child/children will go with them.

Signed: _____

Date: _____

Fancy a Playdate?

Parent Contact List

Each year, the P&C puts together a contact list for those parents who would like to share details for playdates, birthday parties, checking up on things etc.

The P&C will be communicating with families more in email, if you wish for your email address to be shared please also indicate below and supply your current email address.

If you would like to be included on the 2022 Contact List, please fill out the form below and return to the school office. The school can't share your contact details without your permission, so if you don't fill in the form, you won't be on the list and your contact details will not be shared.

Kim and Jen will send out a list in a fortnight's time.

Kind Regards,

Kate Middleton

President
Rosebank P&C

Yes Please

I/we would like to be included on the Rosebank P&C Parent Contact List.

Name: _____

Contacts to be included (Record those you are happy to share):

Telephone: _____

Mobile Telephone: _____

Email: _____