MIRBOO NORTH PRIMARY SCHOOLS GENERAL CONSENT FORM
(this form will cover your child throughout their schooling at Mirboo North)

Schools often need to seek parental permission to cover a wide range of activities and situations. We hope that by placing most of the potential situations on one sheet it will save time and paper. Please read, sign and date and return to the office with enrolment form. Thank you.

CHILD’S NAME_____________________________________ CLASS_________________

PERMISSION TO GO ON LOCAL WALKS

I give permission for my child to go on supervised local walks. Signed………………………….

SCHOOL YARD SUPERVISION

I understand that the schoolyard is supervised from 8.30am until 3.30pm and that the school cannot accept responsibility for children in the yard outside of these times. Signed………………………….

CONSENT TO INSPECTION FOR HEAD LICE CHECKS

Throughout the year, the school will be arranging hair checks in an effort to control the incidence of head lice among students.

The management of head lice infestation works best when all are involved in our screening program. The school is aware that this can be a sensitive issue and is committed to maintaining student confidentiality and avoiding embarrassment or teasing.

Before any inspections are conducted staff will explain to all students what is being done and why, and it will be emphasised to students that the presence of head lice in their hair does not mean that their hair is less clean or well kept than anyone else’s. It will also be pointed out that head lice can be itchy and annoying and if you know you have got them, you can do something about it.

The inspection of students will be conducted by qualified hairdressers or, if one is not readily available, a female staff member. The person conducting the inspections will search through each student’s hair to see if any lice or eggs are present.

In cases where head lice are found, the school will send a written notice home with the child and provide parents with comprehensive advice about the use of safe treatment practices which do not place children’s health at risk. Please note that the law requires that where a child has head lice, that child should not return to school until appropriate treatment has commenced.

☐ I give my consent for above-named child to participate in the school’s Hair Check Program.

Signed………………………………………….. Date………………………………………