



Student Name

First Name	Surname
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Year Level

PC Group

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Medical History

Please provide management/action care plan if your daughter is diagnosed with diabetes, anaphylaxis, epilepsy, severe asthma or any other medical condition and attach to this form. In the absence of a written and signed Anaphylaxis Emergency Treatment Plan standard first aid can be provided in an emergency. Staff will not be able to administer Adrenalin (A.C.T. DET – First Aid Policy).

Medication

Should your daughter need prescription medication dispensed during school hours a Doctor's Certificate with instructions is required.

The medication must be brought to school in the original pharmacy container clearly labelled with the student's name, drug name, dosage and time/s of administration. The expiry date of the medication should also be stated. "Notification And Request By Parent/Guardian For The Administration Of Medication During School Hours" can be obtained from the College.

Please state and specify any medical condition/s:

Student Cyber Safety and Acceptable Computer Use Agreement and BYOD

The College Computer Acceptable policies are available on the college website: <https://stcc.act.edu.au/our-college/our-policies/> Please read the relevant policies and confirm your compliance with the following statements by signing this form.

- I acknowledge that I have read carefully the St Clare's College Cyber Safety and Acceptable Computer Use Policy and agree to abide by the College's policy. I understand there will be consequences for any breach of the policy.

BYOD

- I have read and agree to comply with the Student BYOD Guidelines. I agree to comply with any changes to this policy which will be published on the College's public website.
- I accept my responsibilities and the conditions regarding the use and care of my device/s and use of the Internet as detailed in the St Clare's College Student BYOD Guidelines.
- I accept that failure to comply with this policy could result in disciplinary action including, but not limited to, removal of permission to bring the device to the College.

Media Release:

From time to time there may be a requirement for your daughter's image to be captured as part of a College promotional activity or event. This may include social media and external media. We will of course, at all times ensure that any pictorial representation of students is both appropriate and necessary.

By signing this form, you offer your consent for the College to use images of your daughter in the course of the College undertaking its day-to-day affairs, or promoting the College's image either publicly or privately.

Approval:

By ticking this we acknowledge that the following information has been read and will be complied with:

Student Computer Acceptable Use and Cyber Safety Policy

 Student BYOD Guidelines

 Media Release (to use your daughter's image)

Signatures:

Student:		Parent/Carer:	
Parent/Carer Name: <i>(please print)</i>			Date: