



Local Excursion Permission

I give permission for my child _____ to take part in local excursions to such facilities as James King Park, Drings Hill Reserve, Gol Gol Post Office, Gol Gol Pre-School etc. I understand that my child will walk to and from these venues. Parents will be notified of any outings, but this permission will alleviate the necessity for continual permission for short walk local excursions being sought.

Where the teacher in charge of the excursion is unable to contact me, or it is otherwise impracticable to contact me, I authorise the teacher in charge to consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner, and/or administer such first aid as the teacher in charge may judge to be reasonably necessary.

Parent/Guardian Name:

Please Print

Signature:

Date:

Consent to Conduct Head Lice Inspections

Throughout your child's schooling, the school will be arranging head lice inspections of students. The management of head lice infection works best when all children 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 stigmatisation.

The inspections of students will be conducted by a trained person approved by the Principal. Before any inspections are conducted the person conducting the inspections 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 person conducting the inspections will check through each student's hair to see if any lice or eggs are present. Person's authorised by the school principal may also visually check your child's hair for the presence of head lice, when it is suspected that head lice may be present. They do not physically touch the child's head during a visual check.

In cases where head lice are found, the person inspecting the student will inform the student's teacher and the Principal. The school will make appropriate contact with the parents/guardians.

I hereby give consent for my child _____

to participate in the school's head lice inspection.

Parent/Guardian Name:

Please Print

Signature:

Date:

**** Please inform the school if guardianship/custody changes for your child, as this form will need to be re-signed to reflect these changes. Please also inform the school in writing if you no longer wish to provide consent for the school to undertake head lice inspections for your child.**