



## NextSense School

# Application for enrolment—confidential

Should your child be accepted for enrolment this document will become part of the official enrolment form.

| Child informa              | ation         |    |                     |               | _        |
|----------------------------|---------------|----|---------------------|---------------|----------|
| Child's full name          |               |    |                     | Date          | of birth |
| Address                    |               |    |                     |               |          |
| Suburb                     |               |    |                     | State         | Postcode |
| Hearing loss Details       | Yes           | No |                     |               |          |
| Hearing aids               | Yes           | No | If Yes, date they v | were fitted   |          |
| Cochlear implant           | Yes           | No | If Yes, date they v | were switched | on       |
| Vision loss<br>Details     | Yes           | No |                     |               |          |
| Other disabilities Details | Yes           | No |                     |               |          |
| Diagnosed/verified         | d by          |    | Medical special     | isation       | Date     |
| NDIS How did you hear a    | Yes about us? | No |                     |               |          |

| Country of birth                                                                                 |               | Australia          | n citizen Yes No |
|--------------------------------------------------------------------------------------------------|---------------|--------------------|------------------|
|                                                                                                  |               |                    |                  |
| Permanent resident Yes No                                                                        | Other (please | e specify)         |                  |
|                                                                                                  |               |                    |                  |
| Non-English speaking background Yes                                                              | No In         | terpreter requi    | red Yes No       |
| Aboriginal Yes No                                                                                | To            | orres Strait Islaı | nder Yes No      |
| Are there any court orders, parenting orders or If Yes, a copy must be provided with this applic |               | relating to this   | s child? Yes No  |
| Parent/guardian information                                                                      |               |                    |                  |
| Parent/guardian 1                                                                                |               |                    |                  |
| Name                                                                                             |               |                    |                  |
| Address                                                                                          |               |                    |                  |
| Suburb                                                                                           |               | State              | Postcode         |
|                                                                                                  |               |                    |                  |
| Home phone                                                                                       | Mobile        |                    |                  |
|                                                                                                  |               |                    |                  |
| Email                                                                                            |               |                    |                  |
|                                                                                                  |               |                    |                  |
| Occupation                                                                                       |               | Work phon          | e                |
|                                                                                                  |               |                    |                  |
| Language(s) spoken/used at home                                                                  |               |                    |                  |
| Country of birth                                                                                 | Residenc      | cy/citizenship st  | tatus            |
| <b>, -</b>                                                                                       | 1.55.5.5110   | , <u> </u>         |                  |

| Parent/guardian 2                             |              |                |                    |
|-----------------------------------------------|--------------|----------------|--------------------|
| Name                                          |              |                |                    |
|                                               |              |                |                    |
| Address                                       |              |                |                    |
|                                               |              |                |                    |
| Suburb                                        |              | State          | Postcode           |
|                                               |              |                |                    |
| Home phone                                    | Mobile       |                |                    |
|                                               |              |                |                    |
| Email                                         |              |                |                    |
|                                               |              |                |                    |
| Occupation                                    |              | Work phon      | ne                 |
|                                               |              |                |                    |
| Language(s) spoken/used at home               |              |                |                    |
|                                               |              |                |                    |
| Country of birth                              | Residency    | /citizenship s | tatus              |
|                                               |              |                |                    |
|                                               |              |                |                    |
|                                               |              |                |                    |
| Checklist of documents necessary for          | or enroln    | nent—ple       | ease attach copies |
| Birth Certificate                             | State        | ment from El   | NT (hearing loss)  |
| Passport/Visa Confirmation                    | Ophtl        | halmologist (  | vision loss)       |
| Proof of immunisation                         | Conse        | ent forms sig  | ned                |
| Other reports, e.g. educational, developmenta | al, behaviou | ral or psycho  | logical            |
|                                               |              |                |                    |

## **Enrolment agreement**

I/we agree:

- To ensure regular attendance of my/our child in the program at the times and locations notified to us by NextSense and to notify the administration assistant of the program if attendance is not possible on the designated day;
- To provide copies of any reports relating to my/our child's developmental, behavioural and educational needs which are relevant to the child's enrolment or which become available whilst he/she is enrolled in the program;

- To provide in writing details about any medical condition, including asthma and allergic reactions including any medical management plans, my/our child has, and to immediately notify staff should a new condition/allergy develop;
- To allow NextSense to seek and carry out medical, ambulance, hospital and dental treatment for my/our child, including the transportation of my/our child by an ambulance service, should it be required;
- To assist NextSense to comply with the Privacy Act and to keep its database correct and up-todate by advising in writing of any changes to personal and other details that might impact on my/ our child's education as soon as changes occur;
- To provide copies of any court orders pertaining to my/our child prior to enrolment in the program and to provide copies of changes to those court orders or new court orders, parenting orders or parenting plans that might become effective during the period of my/our child's enrolment;
- To provide relevant consents to enable my/our child to be assessed as necessary for educational purposes by staff of NextSense;
- To provide relevant consents to enable my/our child to fully participate in the program, subject to any reasonable limitations;
- To provide relevant consents to enable NextSense to meet its external reporting obligations;
- To comply with policies, practices and rules of NextSense of which NextSense notifies me/us from time to time;
- To respect the privacy of other children and their families where I/we become privy to their personal information, through actions of NextSense, such as information publicly displayed at centres. In particular I/we will refrain from disclosing their information to third parties without their consent;
- To comply with reasonable requests for information by NextSense;
- To contribute the appropriate fees as determined or altered by NextSense unless otherwise agreed by such dates as determined by NextSense;
- That NextSense may send me/us material regarding NextSense and its activities (including the 'Abilities' newsletter) from time to time by ordinary post or by email unless I/we notify NextSense to stop;
- NextSense reserves the right to review/terminate a child's enrolment after consultation between NextSense's designated staff member and myself/ourselves if the conditions specified on their enrolment form are not met, or it is considered to be in the best interests of NextSense or my/our child that his/her current enrolment should be terminated, and:

That continued enrolment will depend upon:

- My child's disabilities remaining at the level specified in the current NextSense enrolment criteria;
- The health of my child being of sufficient level to enable the organisation to fulfil its duty of care; and
- My child's behaviour not causing disruption or a threat to other students or staff.

|   | /we        | un  | dei | rstanc | l/we | will k | oe ir | ntorn | ned | O† | any | changes | in t | he c | condit | ions. |
|---|------------|-----|-----|--------|------|--------|-------|-------|-----|----|-----|---------|------|------|--------|-------|
| ( | $\bigcirc$ | Yes | (   | No     | )    |        |       |       |     |    |     |         |      |      |        |       |

#### Consents

NextSense requests your consent in relation to a number of matters which are detailed below. Some of these are vital to NextSense's capacity to provide the best possible service. If you have any queries regarding these matters, please discuss them with the Manager/Principal of your child's program.

These consents are given by me/us on my/our behalf and on behalf of my/our child:

#### **Tertiary students**

I/we consent to NextSense hosting tertiary students who are undertaking practical elements of their course of study provided that:

- students only observe, assess and interact with my child under the direct supervision of NextSense staff; and
- any reports or assignments produced by students will not identify my child by name without my prior consent.

| ( ) Yes | ()No |
|---------|------|

#### Photographs and film

I/we consent to photographs and video/film of my/our child being used by NextSense in NextSense publications (including the NextSense website and other associated websites and/or online resources), promotional videos, displays, and the media, or otherwise displayed at NextSense premises.

I/we acknowledge that NextSense:

- will only use or display images of my/our child in an appropriate and positive way;
- will not disclose the name of my/our child (apart from their first name) when publishing photos and video/film without first seeking my/our further consent;
- will endeavour, where it is reasonably possible, to seek my/our child's consent to being photographed or filmed; and
- I/we or my/our child will not receive any payment for use of their photo or video/film by NextSense.

| Yes | No    |
|-----|-------|
| 103 | V 110 |

I/we understand that I/we can withdraw the consent in relation to photographs and film at any time.

### **Privacy**

I/we consent to NextSense's collection of the information specified in the enrolment forms, including all information which is "sensitive" information as defined in the Privacy Act, 1988, (Cth), such as health, cultural and religious information.

I/we consent to the ongoing collection and holding of information, including but not limited to video footage relating to my/our child's program.

I/we consent to the disclosure, by NextSense, of personal information to the persons or classes of persons referred to in paragraph (d) of the Privacy Statement and to disclosure in other instances where NextSense in good faith deems such disclosure to be necessary or desirable for the welfare of the child or for the performance of its services.

| I/v | ve:                                                                                                                                       |                                |     |      |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-----|------|
| 1.  | Have read and agree to the terms and conditi<br>Agreement set out above.                                                                  | ons of the Enrolment           | Yes | No   |
| 2.  | Give the consents and acknowledgements se                                                                                                 | t out above.                   | Yes | ○ No |
| 3.  | Have read and understood the Privacy Statem<br>NextSense in this document.                                                                | nent made by                   | Yes | No   |
| 4.  | As a condition of funding we receive from the Ageing, Disability and Home Care, we are req in receipt of Carer's Allowance.               | •                              | Yes | No   |
| Lc  | w vision aids—vision impairment enrolments o<br>Agree for my/our child to be seen by NextSen<br>be monitored by the NextSense Honorary Op | nse orthoptist and to          | Yes | No   |
| Sig | gnature of Parent/Guardian 1                                                                                                              | Signature of Parent/Guardian 2 | 2   |      |
| Na  | ame                                                                                                                                       | Name                           |     |      |
|     | ate                                                                                                                                       | Date                           |     |      |
| 1   |                                                                                                                                           |                                |     |      |

Please return completed forms to:

NextSense
Private Bag 29
Parramatta NSW 2124

## Information exchange Child's name Date of birth Please sign below to give permission for NextSense to exchange information with specialists and other service providers (e.g. ENT, ophthalmologist, Australian Hearing) for purposes of your child's education. Service provider Address Contact person Phone number Permission to send information Permission to request information Yes Yes Signature of parent/guardian Date Service provider Address Contact person Phone number Permission to request information Permission to send information Yes No Yes Signature of parent/guardian Date Service provider Address Contact person Phone number

Permission to request information

No

Signature of parent/guardian

Yes

Permission to send information

Date

No

Yes

| Address                           |                                        |  |  |  |
|-----------------------------------|----------------------------------------|--|--|--|
|                                   |                                        |  |  |  |
| Contact person                    | Phone number                           |  |  |  |
|                                   |                                        |  |  |  |
| Permission to request information | Permission to send information  Yes No |  |  |  |
| Yes No                            |                                        |  |  |  |
| Signature of parent/guardian      | Date                                   |  |  |  |
|                                   |                                        |  |  |  |
| Service provider                  |                                        |  |  |  |
|                                   |                                        |  |  |  |
| Address                           |                                        |  |  |  |
|                                   |                                        |  |  |  |
| Contact person                    | Phone number                           |  |  |  |
|                                   |                                        |  |  |  |
| Permission to request information | Permission to send information         |  |  |  |
| Yes No                            | Yes No                                 |  |  |  |
| Signature of parent/guardian      | Date                                   |  |  |  |
|                                   |                                        |  |  |  |
| Service provider                  |                                        |  |  |  |
| <u>'</u>                          |                                        |  |  |  |
| Address                           |                                        |  |  |  |
|                                   |                                        |  |  |  |
| Contact person                    | Phone number                           |  |  |  |
|                                   |                                        |  |  |  |
| Permission to request information | Permission to send information         |  |  |  |
| Yes No                            | Yes No                                 |  |  |  |
| Signature of parent/guardian      | Date                                   |  |  |  |

## **Privacy statement**

NextSense (previously the Royal Institute for Blind and Deaf Children) is bound by legislation protecting the privacy of the children, families and other individuals with whom the Institute deals. This legislation includes the Commonwealth Privacy Act 1988 (the "Privacy Act"). In the course of applying for admission to NextSense and during the period of enrolment, we will request you to provide us with personal and sensitive information about your child, your family and responsible others. Much of the information that we are required to record is in the category of "sensitive" information (as defined in the Privacy Act) dealing with such matters as a child's cultural background or "health information".

This statement is provided in accordance with National Privacy Principle 1.3, to be found in Schedule 3 of the Privacy Act.

#### Please note that:

- **1.** All personal information is collected by NextSense. NextSense's privacy policy can be found on our website, or by asking at any of our centres. NextSense can be contacted by the following means:
  - Postal address: Private Bag 29, Parramatta NSW 2124, Attention: the Chief Privacy Officer;
  - Phone: 02 9871 1233 and ask for the Chief Privacy Officer;
  - Fax: 02 9871 2196 Attention: the Chief Privacy Officer; or
  - Email: online@nextsense.org.au
- 2. NextSense collects information for the purpose to perform its duties as a responsible provider of child-care services and for the purpose of providing the best educational experience for your child. NextSense also uses such information to keep you informed of services that it offers from time to time and sometimes to make contact to request assistance with fundraising.
- **3.** All individuals have a right to gain access to the personal information held by NextSense about them. In some circumstances, however, NextSense may be entitled to refuse such access.
- **4.** The young people entrusted to our care are "individuals" whose information is subject to the provision of the Privacy Act. However, in all but exceptional cases, it is our policy that the children in our care lack the maturity and understanding of privacy issues to act on their own in relation to such matters. Instead we will, where consent is required, seek such consent from the parent or guardian on behalf of the child. Where access rights are available to the child, access will be given on the request of the parent or guardian.
- 5. Personal information collected may be disclosed to:
  - a. the parents, guardian or other person responsible for the child;
  - **b.** other family members or family contacts in an emergency or where the child is ill or injured or is at risk of illness or injury, or simply where the child is delivered to or collected from the centre;
  - c. the child's medical practitioner;
  - **d.** other health or medical practitioners where the child is sick or injured or at risk of illness or injury;
  - e. police and other law enforcement officers in the course of their investigations and enquiries;
  - **f.** NextSense's solicitors and other advisers from time to time:

- **g.** authorised officers as defined in the regulations made under the Children (Care and Protection Act), 1988 (NSW) and other legislation binding on NextSense, concerning child protection;
- h. government agencies when required for assistance and funding arrangements;
- i. visitors to NextSense centres, including other family members, trades people and service providers. Some personal information of the child and family members may be on display, such as photos, artwork and other materials that may divulge names, ages, developmental levels, addresses, ethnic and religious background or affiliation and health matters. In relation to the latter, in some cases it may be necessary to have on display health information so that we can have ready access to it for emergency purposes. Such information on display may identify not just the relevant child but parents and responsible others;
- j. external contractors. Like many other organisations, NextSense from time to time uses the services of temporary staff. They are generally employees of a recruitment firm, not of NextSense. To that extent they are external contractors who may have access to the personal information we have collected. They will in each case be advised of our privacy policy and of the requirement that they comply with it; and
- k. to third party, with your permission, entities for fundraising or publicity purposes.

This is not an exhaustive list. There may be many other circumstances where NextSense will be required to disclose personal information held about the child to a person other than the parent or guardian.

- **6.** NextSense is required to collect certain information under the Children (Care and Protection) Act 1987, the Children and Young Persons (Care and Protection) Act 1998 and various Regulations made under that Act. NextSense is also required to collect personal information under the terms of its licence to operate a Children's Service in NSW from the Department of Education and Communities.
- 7. NextSense is required to account for the funding provided by government for all children enrolled. In most cases NextSense provides coded details which ensure that no child or family is identifiable. NextSense also provides coded information to the Australian Institute of Health and Welfare for statistical purposes only. Some sources of funding are dependant on providing the name of the child. We will always obtain your permission to provide this information. This may mean we need to seek your permission on a number of occasions to forward this information to the funding agency.
- **8.** Failure to provide the personal information requested in the enrolment form may make it impossible for NextSense to accept the application for enrolment. Failure to provide information requested by NextSense from time to time may compromise NextSense's ability to provide services to a child or its ability to perform other tasks for the child's welfare.
- **9.** We will retain personal, sensitive or health information only for as long as it is necessary. We are subject to some external requirements in relation to the retention of student records.
- **10.** We will take all reasonable steps to ensure that the information you provide is protected from misuse, loss, unauthorised access, modification or inappropriate disclosure.
- 11. We will use our best endeavours to ensure that information we hold is up to date and accurate and we seek your assistance in providing us with details of any changes to information.