

**Parental/Guardian Consent for
Voluntary Student Participation in Chaplaincy Program at
Bajool State School**

Parent/Guardian Name/s	
Student Name (in full)	
Student Name (in full)	
Student Name (in full)	

This school community provides a chaplaincy program endorsed by the school's Parents and Citizens' Association and available on a voluntary basis to all students. The chaplain is involved in a range of activities which happen at this school which are free of religious, spiritual and/or ethical content. These activities are available to all students on a voluntary basis unless a parent or guardian requests in writing that this is not to occur for their child/ren.

Chaplains may also be involved in activities with religious, spiritual and/or ethical content and additional consent is sought from parent/guardians for these specific activities.

<p>Voluntary Student Activities <i>without</i> Religious, Spiritual and/or Ethical Content These activities are available to students on a voluntary basis if a parent or guardian has given consent in writing.</p>
<p><i>1. List activities without religious, spiritual and/or ethical content provided at the school through the chaplaincy program.</i></p> <ul style="list-style-type: none"> • <i>Craft Activities</i> • <i>Sporting Events</i> • <i>General classroom teacher support</i> • <i>Lunch and play time interactions</i> • <i>Cultural Events</i>
<p><i>Please tick one of the boxes below:</i></p> <p><input type="checkbox"/> I give my consent for my child/ren to participate in these activities</p> <p><input type="checkbox"/> I do not give my consent for my child/ren to participate in these activities.</p>

- I understand that, where I agree that my child/ren can participate in the chaplaincy program, this information will be passed on to the school chaplain.
- I understand that, this approval is for the length of time my child/ren are enrolled at Bajool State School.

Parent's Signature _____

Date _____