Parental/Guardian Consent for Voluntary Student Participation in Chaplaincy Programs at Merinda State School

Parent/Guardian Name/s		***************************************
Student Name (in full)		
Student Name (in full)		4
Student Name (in full)		
Association and available on activities at this school that which could include mentor conflict resolution, interventic the breakfast program on Wunless a parent or guardian representation of the boxes. I give my consent for my consent is sought from the school's of any additional activities were consented that the school's consent for my consent for my consent for my consent is sought from the school's consent for my c	des a chaplaincy program endorsed by the school's Parents and Citized a voluntary basis to all students. The chaplain is involved in a range are free of religious, spiritual and/or ethical content. These activiting, coaching, involvement in sports/games, reading/learning support and prevention of bullying, general verbal encouragement along were deducted and prevention of bullying, general verbal encouragement along were deducted and prevention of bullying, general verbal encouragement along were deducted and prevention are available to all students on a voluntary base equests in writing that this is not to occur for their child/ren. See below: Child/ren to participate in these activities for my child/ren to participate in these activities. Colved in activities with religious, spiritual and/or ethical content and om parent/guardians for these specific activities. Chaplaincy program is on the school's website. Prior to commenceme with religious, spiritual and/or ethical content in the school, parent up the school newsletter and website.	e of ies, ort, vith isis
	with Religious, Spiritual and/or Ethical Content ble to students on a voluntary basis if a parent or guardian has	
1. A One-on-one meeting with	Chaplain for ethical, spiritual or religious support, pastoral care.	
2. Group meeting with chaplain	n for personal, behavioural, emotional, social support.	Commence of the control of the contr
chaplaincy services which consent is inclusive of all otherwise in writing. do/does not have my consechaplaincy services which has I understand that, where I agree information will be passed on to all the consent of	participate on a voluntary basis in activities within the program of have religious, spiritual and ethical content. I understand that this such activities and remains operational unless I advise the school nt to participate on a voluntary basis in activities within the program of ave religious, spiritual and ethical content. See that my child/ren can participate in the chaplaincy program, this the school chaplain.	3 -
Parent's Signature Office Use: Patain original in student's file of		
rvetain original in student's lile a	nd provide a copy of notice to the parent/guardian.	