

**TRANSITION SUPPORT UNIT  
Expression of Interest and Consent**

Student Contact Details			
Name:		Date of Birth:	...../...../.....
1. Parent / Guardian Contact Details			
Name:		Phone:	
Address:		Email:	
2. Parent / Guardian Contact Details			
Name:		Phone:	
Address:		Email:	
3. School Details:			
Current or last School Enrolment:		Grade and Year attended:	

**Parent / Guardian Consent to Assist and for the Exchange of Information**

This Transition Support Unit was created to support a successful transition for your child to secondary school. The information collected by the Transition Support Unit (TSU) will enable TSU staff to support your child and your chosen school/s prepare for their secondary program. This may involve:

- liaising with the intended/current boarding school or boarding provider and discussing the student's strengths and needs,
- liaising and collaborating with the students current and past school to gain information regarding their school reports and attendance, Education Adjustment Plans (EAP) and wellbeing behaviour plans.
- liaising with health providers to access up to date medical information for eg immunisation records, hearing and sight tests to support the boarding application process.
- liaise with the Department of Human Services to assist the student and family gain access to the ABSTUDY payment.
- liaise with non-government organisations to share travel information and reengagement plans to support students engagement with education.
- Scheduled visits in boarding schools that are located in the Northern Territory and interstate to continue the advocacy and rapport for new and current TSU students while liaising closely with their community.

**Privacy Statement**

The Department of Education is collecting personal information regarding your child to ensure the TSU is responsive to your child's individual needs. Only personnel that you identify below will access the information. We will not give your information to any other person or agency unless you have given us permission or law requires us.

We ask that you please read the following statement and sign below so it is clear who is able to access this information:

***I give consent for the following agencies to share information with the Transition Support Unit (TSU) for the purposes of providing support to my child for transition to secondary school.***

Agency Name	
Department of Education (NT) -Transition Support Unit	Boarding school to be enrolled in/ already enrolled in:
Department of Human Services (Australian Government)- ABSTUDY	Community Clinic or Health Care Provider
Non-Government Organisation (NGO)	

**Parent / Guardian Consent for the use of Images**

The TSU would like to take images of your child at school, sporting events, to and from boarding school, workshops, excursions or community events. These images may be used to create a folio for your child to present to a prospective boarding school. Images may also be used for classroom and curriculum resources, TSU displays at events and newsletter articles. All images will remain the property of the student and family.

***I give consent for the use of photos, videos or similar images of the student for class and curriculum resources, TSU displays and newsletter articles.***

**Parent / Guardian Consent for Travel**

The TSU request your permission for your child to travel in an approved vehicle or on public transport with a TSU staff member. This may be transporting students to and from school events, home and airports for school travel, to organised appointments or general community business.

***I give consent for my child to travel in TSU approved vehicles or public transport with a TSU staff member.***

I \_\_\_\_\_ have read and understood the above information and give consent for the Transition Support Unit to support my child transition to secondary school.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_