Pine Rivers State High School

Gympie Road Strathpine 4500
PO Box 524 Lawnton 4501
Phone: 07 3881 4700
pineriversshs.eq.edu.au

Privacy Statement

The Department of Education is collecting this personal information in order to:

- obtain consent for the child/student to participate in the excursion;
- help coordinate the excursion;
- respond to any injury or medical condition that may arise during or as a result of the excursion; and
- update school records where necessary.

The information will only be accessed by authorised departmental staff. The information will not be disclosed to any other person or agency unless we have your consent or we are required or authorised by law to do so e.g. in compliance with relevant Queensland Chief Health Officer's Directions.

Excursion consent form - After School Mathematics Tutoring 2027

Why	The excursion has been approved by the Principal. Its aims are: Our Mathematics teachers offer their time after school to run Mathematics tutoring sessions to support all students, in all year levels to achieve their best in Mathematics. Students are welcome to attend tutoring to complete classwork, homework, seek assistance with assessment or to complete individual or group study for exams. We are pleased to offer these after school tutoring sessions free of charge. There is no requirement for students to register prior to attending a tutoring session, however, this consent form must be completed prior to their attendance at tutoring. Students are required to sign in and out of tutoring in the attendance book and are free to come and go as they please. Students are required to bring work to complete during tutoring sessions - if they require additional work, they should consult with their class teacher before attending tutoring. Please be aware that students will need to arrange their own transport home.

When and where	• 02/02/2026 - Room G06, 3PM - 4PM every Monday commencing 2nd February until 23rd November • 04/02/2026 - Room G06, 3PM - 4PM every Wednesday commencing 4th February until 25th November • 05/02/2026 - Room G06, 3PM - 4PM every Thursday commencing 5th February until 26th November
How	Transport to the excursion will be: **Parents/carers are required to ensure students have transport organised after they depart tutoring..** During any travel, Queensland child restraint laws will be followed e.g. seatbelts, booster seat or cushion.
What	During the excursion, students will be undertaking the following activities: • Completing classwork, homework, seeking assistance with assessment or completing individual or group study for exams
Cost	There is no cost for this excursion.
Additional requirements	The details of Mathematics tutoring are as follows: DAYS: Mondays, Wednesdays and Thursdays excluding public holidays + other specific days for operational reasons. Students should check Compass notices to see if tutoring will not run on a specific day. TIME: 3PM - 4PM WHERE: Room G06 MATERIALS: Maths exercise book, laptop + charger or textbook, pens, calculator, ruler. If you require any further information, please contact your child's Mathematics teacher on 3881 4747 or Mr Weller on 3881 4748.

For further information

For information on behaviour expectations, access the Student Code of Conduct at https://pineriversshs.eq.edu.au/SupportAndResources/FormsAndDocuments/Documents/Policies/student-code-of-conduct.pdf#search=code%20of%20conduct.

For information on:

- risk assessment
- reasonable adjustments for children/students with disabilities, medical or individual requirements
- other details about this excursion

Contact - **Carl Weller, Head of Department Mathematics** using email address **cwell110@eq.edu.au** or phone number **38814748**.

Health information

The school collected health information about the student at registration/enrolment. Please answer the following questions and provide the required details

Is there any new or updated health information (e.g. health condition / medication / dietary requirements / travel issues) which may affect the student's full participation in the excursion?

◯ Yes ◯ No

If yes, please provide all relevant information, so these health needs can be considered during the planning of the excursion.

Emergency contact information

It is important that the school can contact you easily if there is an emergency during the excursion. Please enter emergency contact details.

Emergency contact name for the duration of the excursion

Emergency contact phone number

Email address

Activity risks and insurance

The Department of Education does not have personal accident insurance cover for children/students. If a child/student is injured as a result of an accident or incident while participating in the excursion, all costs associated with the injury, including medical costs are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If the parent/carer has private health insurance, some costs may also be covered by that provider. Any other costs must be covered by the parent/carer. It is up to parent/carer to decide the type/s and level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow the child/student to participate in this excursion.

Consent information

School name: Pine Rivers State High School

Return form by: 13/02/2026

To give consent for the student to participate in this excursion, you must agree to all the following statements:

- I have read all of the information in relation to the excursion (including any attached material).
- I am aware that the department does not have personal accident insurance cover for students.
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment the child/student may reasonably require.
- I accept liability for all reasonable costs incurred by the department in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the department the full amount of those costs.
- I have provided the school with all relevant details of the child/student's medical or physical needs on registration/enrolment and where relevant have updated this information.
- I give consent for contact information to be shared in relation to this excursion in compliance with relevant Queensland Chief Health Officer's Directions.

Consent declaration *

◯ Yes, I agree ◯ No, I do not agree

Student name	Class and year level	
Print parent/carer name	Print parent/carer signature	Date
Phone number	Email address	

Return all pages of the excursion consent form to the school office. You may wish to keep a copy for your own records.