

# Students: Applicant declaration, acknowledgement and consent form for the Shanghai Sister Cities Youth Camp

Please read and tick each box to confirm that you have understood each section. Incomplete forms without all sections ticked and signed will not be accepted. By signing below, the applicant and parent(s)/guardian(s) declare:

	I am/the applicant is an Australian citizen, permanent resident of Australia, or New Zealand citizen residing in Australia.
	I/We have read, understood and accept the Privacy Statement.
	I/We have read, understood and agree to the <i>Students: Eligibility requirements and conditions</i> and if selected for the program, agree to comply with these rules including me/my child being sent home at my own expense if any program rules are breached, and acknowledge the department is not liable for any loss.
	I/We have read, understood and agree to the International School Study Tours Student Participant Agreement and to follow the school's Code of Conduct which applies to students during the tour, under the care and control of supervising teachers and other adults.
	I am/the applicant is available to travel on the dates advised for the program, agree to participate in all briefings, events and activities pre- and post-program, and provide all documents/information required within the requested timeframes.
	I am/the applicant is willing to obtain a 'Fitness to travel' medical certificate upon request, and to provide any additional information necessary to ensure appropriate support throughout the program.
	I/The applicant will in accordance with the Group Medical Conditions (group policies) listed by GoSafe Travel Insurance inform the organisers if my/the applicants health changes such that I am/the applicant is no longer medically fit to travel.
	All information provided in my/the applicant application is true and correct.

<b>Applicant signature:</b>	<b>Parent/Guardian 1 signature:</b>	<b>Parent/Guardian 2 signature:</b>
<b>Applicant name:</b>	<b>Parent/Guardian 1 name:</b>	<b>Parent/Guardian 2 name:</b>
<b>Date:</b>	<b>Date:</b>	<b>Date:</b>

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## Project Consent Form cover letter

Dear [Parent/carer/individual]

Introduction to the Project Consent Form for **Shanghai Sister Cities Youth Camp**.

This letter is to inform you about how the Department of Education (department) will use, record and disclose your or your child's personal information and material. It outlines:

- what information we record; and
- where and how we will use the materials.

Examples of personal information, which may be used and disclosed (subject to consent), include part of a person's name, image/photograph, voice/video recording or year level.

Materials that are created by you or your child, whether as an individual or part of a team, may be replicated in full or modified for purpose. This includes copyright material, including written, artistic or musical works, video or sound recording created in connection with the project.

Personal information may include identifying each person who contributed to the creation. The material and personal information may also represent Indigenous knowledge or culture.

### Purpose of the consent

This Project Consent Form relates to **Shanghai Sister Cities Youth Camp**. A full outline of the program is available at this location: <https://education.qld.gov.au/schools-educators/international/global-opportunities/explore>.

It is the department's usual practice to take photographs or record images and occasionally to publish limited personal information and materials for the purpose of promoting Queensland education.

To achieve this purpose the department may use newsletters, its website, traditional media, social media or other new media as listed in the 'Media Sources' section below. The department may also use images on a range of materials including (but not limited to) advertising, marketing materials, presentations and publications.

Because of this, the Project Consent Form provides consent for personal information and a licence for materials to be published online or in other public forums.

The department holds images in its Digital Asset Management Library and these may be used by the Queensland Government to promote a range of initiatives.

The department needs to receive consent in writing before it uses or discloses an individual's personal information or materials in a public forum. The attached form is a record of the consent provided.

### Voluntary

It is your choice whether to give consent.

### Consent may be withdrawn.

Consent may be withdrawn at any time by you.

If you wish to withdraw consent, please notify the departmental contact in writing (whether by email or letter). The department will confirm the receipt of your request if you provide an address.

The department will endeavour to take down content that is in its direct control; however, published information and materials cannot be deleted and the department is under no obligation to communicate changes to consent with other entities/ third parties.

Due to the nature of the internet and social media (which distributes and copies information), it may not be possible for all copies of information (including images and materials), to be deleted or restricted from use once published.

### Media sources used

The department will publish images and materials on a range of social media, websites and traditional media sources subject to your consent. Please see the following webpage for a full list of sources where the project may be published.

<https://education.qld.gov.au/parents-and-carers/parent-participation/use-images-recordings>

### Duration

The consent is ongoing unless you decide to withdraw your consent.

### Who to contact

If you have any questions or wish to withdraw consent please contact [global.engagement@qed.qld.gov.au](mailto:global.engagement@qed.qld.gov.au).

Please retain this letter for your records and return the signed consent form.

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# Project Consent Form - Shanghai Sister Cities Youth Camp

## 1. IDENTIFY THE PERSON TO WHOM THE CONSENT RELATES (including individuals)

Parent/carer to complete for students under 18. Independent students may complete on their own behalf and if under 18 a witness is required. Otherwise, the consenter is to complete.

**Full name (student):**

**Date of Birth:**

## 2. PERSONAL INFORMATION AND MATERIALS COVERED BY THIS CONSENT FORM

a) **Personal information that may identify the person in section 1 (tick one box below):**

**No name      First name      Full name**

Image/photograph, School Name, Recording (voices and/or video), Year level

b) **Materials created by the person in section 1:**

Sound recording, Artistic work, Written work, Video or image Software, Music score, Dramatic work **(tick the box)**

## 3. PROVED PURPOSE AND TIMELINE FOR CONSENT

The personal information and materials (as detailed in section 2) will be recorded, used and/or disclosed (published) by the school, Department of Education (DoE) and the Queensland Government for the following purposes (the approved purpose):

- any activities engaged in during the course of the project, as described in the attached letter, or purposes of public relations, promotion, advertising, recruitment advertising, presentations, publications, displays, media, promotional, marketing and communication materials and commercial activities.
- The personal information and materials (as detailed in section 2) will be disclosed (published) for the approved purpose via social media, online or in printed or other forms of media as set out at <https://education.qld.gov.au/parents-and-carers/parent-participation/use-images-recordings>, including: any purpose, commercial or otherwise, required by operators of the websites as a condition of uploading the personal information or materials; and transfer of the personal information outside of Australia in the course of the operation of the website.

Consent is ongoing unless it is withdrawn as outlined in the attached letter.

## 4. CONSENT AND AGREEMENT To record the consent please sign the top of the following page

**I am (tick as applies):**

- ☐ parent/carer of the identified person in section 1
- ☐ the identified person in section 1 (if an individual, independent student, teacher or volunteer)
- ☐ recognised representative for the Indigenous knowledge or culture expressed by the materials

I have read the explanatory letter, or it has been read to me. I have had the opportunity to ask questions about it and any questions that I have asked have been answered to my satisfaction. By signing below, I consent to DoE recording, using and/ or disclosing (publishing) the personal information and materials identified in section 2 for the approved purpose as detailed in section 3.

I acknowledge that I will not be paid for giving this consent nor will a payment be made for the use of personal information or material.

By signing, I also agree that this Project Consent Form is a legally binding and enforceable agreement between the consenter, the department and the State. For the benefit of having the materials (detailed in section 2) promoted as DoE may determine, I grant a licence for such materials for this purpose. I acknowledge I remain responsible to promptly notify DoE of any third party intellectual property incorporated into the licensed materials. I accept that attribution of the identified person, in section 1 as an author or performer of the licensed, materials may not occur. I accept that the materials licensed may be blended with other materials and the licensed materials may not be reproduced in their entirety.

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## Project Consent Form - Shanghai Sister Cities Youth Camp

**Print name of student:**

**Print name of individual/consenter:**

**Signature or mark of individual/consenter:**

**Date:**

**Signature or mark of student:** (if an independent student):

**Date:**

### **SPECIAL CIRCUMSTANCES** (This section is generally not required)

In many circumstances only the above signatures are necessary. However, there may be special circumstances that could apply. Examples include where the form is required to be read out (whether in English or in an alternative language or dialect). Another occasion may be where the consenter is an independent student and under 18.

#### **WITNESS – for consent from an independent student or where the explanatory letter and Project Consent Form were read.**

I have witnessed the signature of an independent student, or that the accurate reading of the explanatory letter and the Project Consent Form was completed in accordance with the instruction of the potential consenter. The individual has had the opportunity to ask questions. I confirm that the individual has given consent freely and I understand the person understood the implications.

**Print name of witness:**

**Signature of Witness:**

**Date:**

#### **Statement by the person taking consent – when it is read**

I have accurately read out the explanatory letter and Project Consent Form to the potential consenter, and to the best of my ability made sure that the person understands that the following will be done:

1. the identified materials will be used in accordance with the Project Consent Form
2. reference to the identified person will be in the manner consented
3. in accordance with procedures DoE will cease using the identified materials from the date DoE receives a written withdrawal of consent.

I confirm that the person was given an opportunity to ask questions about the explanatory letter and Project Consent Form, and all the questions asked by the consenter have been answered correctly and to the best of my ability. I confirm that the individual has not been coerced into giving consent, and the consent has been given freely and voluntarily.

A copy of the explanatory letter has been provided to the consenter.

**Print name and role of person taking the consent:**

**Signature of person taking the consent:**

**Date:**

### **Privacy Notice**

The Department of Education (DoE) is collecting your personal information on this form in order to obtain consent for the use and disclosure of the individual's personal information. The information will be used and disclosed by authorised departmental employees for the purposes outlined on the form and may also be used or disclosed to third parties where authorised or required by law. This information will be stored securely. If you wish to access or correct any of the personal information on this form or discuss how it has been dealt with, please use the contact details identified in the Introduction to the Project Consent Form.

## Finish