

Wednesday, 23 October 2024

Sharing information for student ID card – Consent

Dear Parents/Caregivers

Student ID cards are an official form of identification and important part of your child's participation in our school.

Your child's student ID card provides them access to the following:

- printing and photocopying facilities
- identification during exams
- concession travel on public transport
- other student concessions.

We currently use an external service, Advancedlife Photography, to produce our student ID cards.

To produce your child's card, we need to share student information to the above service (including your child's full name and date of birth). I want to assure you our service agreement ensures strict confidentiality and disposal provisions, and that the information provided will only be used for the intended purpose of producing the student ID card.

We are asking families to complete the attached consent form, to ensure we have documented your consent to share this information.

Your consent will remain valid for the duration of your child's enrolment at our school.

If you have any concerns or wish to discuss further, please contact our front office staff at Ocean View P-12 College on 8248 1422 or email dl.0908.info@schools.sa.edu.au

Yours faithfully,

Sonia Pringle



Principal
Ocean View P-12 College



Government
of South Australia
Department for Education

Le Fevre
PENINSULA PARTNERSHIP

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T 08 8248 1422
F 08 8341 8235

Harbor View Campus

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Port Adelaide SA 5015

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F 08 8447 5670

Children's Centre

Gedville Road,
Taperoo SA 5017

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www.oceanview.sa.edu.au

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 [ocean_view_college](https://www.instagram.com/ocean_view_college)

Ocean View P-12 College



As the parent of:

Full name of student:

I:

Full name of parent

- Yes, I give consent for the release my child's full name, class, date of birth and student ID number for the purposes of student ID card production.
- No, I do not give consent to this information being shared. Please contact me directly to discuss options available.

External services providers follow strict confidentiality and disposal provisions, and the information being shared is for this intended purpose only.

I agree and acknowledge that my consent (if provided) will remain active/in place for the entire time my child is enrolled and attending at the school unless I withdraw it by notifying the principal (or delegate) in writing.

Parent
Signature:

Date:

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